Internship Agreement and Registration Form

Each of the five programs in the Nicholson School of Communication (HUMAN COM ■ COM & CONFLICT ■ RTV ■ Ad-PR ■ JOU) permits students to perform internships for credit. Each program has its own policies and procedures that govern how many hours of credit may be earned and counted toward graduation and what is required of the student performing the internship. You are required to obtain, read and follow the instructions in your program’s internship fact sheet available in the Nicholson Academic Student Services Center (NASSC), NSC 143. If you have any questions, you may contact the center at (407) 823-2681.

The following procedures apply to all internships in the NSC:

1. Obtain the fact sheet for internships in your program from your faculty member or in NASSC, located in NSC 143.

2. See a faculty member in your major to ensure that you are qualified to take an internship for credit. The faculty member can also assist you with internship selection or the qualification of the internship site. We recommend that you begin meeting with faculty 1 to 2 months prior to the registration deadline.
   a. NOTE: Ad-PR majors are not required to meet with a faculty member prior to completing the internship form. However, they must complete either PUR 4000 or ADV 3008 prior to completing internship credit.

3. Complete attached internship form. The form must indicate:
   a. Complete contact information, including UCF PID and Knights E-mail address
   b. UCF and Major GPAs
   c. Total credit hours completed
   d. Previous internship hours completed
   e. Term you plan to complete the internship (summer internships are for session “C” only)
   f. Area of internship (COM ■ RTV ■ ADV ■ PUR ■ JOU)
   g. The number of credits you wish to enroll
   h. Pre-requisite courses you have completed with grades earned
   i. How many hours per week you will work for the employer
   j. Place where you plan to intern

4. Contact your internship employer. Have them complete the Employer Approval for Internship section. If the employer has a job description for the internship, it may be attached to the form and the designated duties description may be left blank. Your internship employer must sign the form prior to obtaining the faculty member’s and program coordinator’s signatures.

5. Obtain the faculty member’s and program coordinator’s signatures and bring completed forms to NASSC in NSC 143. Once approved by NASSC, registration must be completed in person by the College of Sciences Academic Services (COSAS) office in CSB, Room 250.

6. Deadline: Completed forms must be turned in to NASSC before the registration deadline. Regular Registration is typically defined by the university as the business day prior to the start of the Add/Drop period. Please consult the current UCF academic calendar at http://www.registrar.sdes.ucf.edu/calendar/academic for specific dates.

7. Late Registration Fee: UCF policy states that students who are not enrolled in any courses and who register for the first time (meaning that you did not enroll in any courses prior to add/drop week) during Late Registration and Add/Drop period will be assessed a Late Registration Fee of $100. Internship registration should be completed prior to the start of Add/Drop to avoid the late fee. All registration activity must be completed by 11:59 p.m. on the last day of Late Registration and Add deadline. No late adds or drops will be permitted. This may not apply to you if you are enrolled in courses before add/drop begins.

You may contact NASSC with any questions at (407) 823-2681.
INTERNSHIP AGREEMENT AND REGISTRATION FORM

Name: _________________________________________________________________ PID: ________________________________
(Print-Last)                                             (First)  
Major: ___________________________ E-mail: ________________________
@knights.ucf.edu  
Phone: ______________________
UCF GPA: _________ Major GPA: ___________ Total Credit Hours Completed: ______ Previous Intern Hours Completed: _______

1. EMPLOYER APPROVAL OF INTERNSHIP
I have been informed of the requirements of the Nicholson School of Communication internship program and understand my responsibility regarding the requested internship. I have interviewed the student. We have agreed to an internship for _______ credit hours. The student plans to work a minimum of __________ hours per week for the semester. The internship will run concurrently with the university’s academic semester and end on the last day of classes for the term. The final internship report and/or evaluation are/is due to the faculty member on or before ______________ or by the last day of class. It may be mailed directly or faxed (attention to the specific faculty member) to (407) 823-6360.

Designated duties of the intern are: (Please be specific or attach a job description to the agreement).
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________

Company Name: ________________________________________ Supervisor Name: ______________________________________
Supervisor E-mail: __________________________________________ Supervisor Phone: __________________________________
Supervisor Address: ____________________________________ City: ______________ State: __________ Zip: ______________
Supervisor Signature: ____________________________________________ Date: ________________________________________

2. FACULTY APPROVAL OF INTERNSHIP

Course Goal: To provide students with a context for interpreting the theories and tools presented in their program course work, and to provide them with an opportunity to apply them in a practical setting
Course Description: Provides student with supervised, industry-related work experience in a sponsoring organization
Course Requirements: Per degree program, see UCF Undergraduate Catalog
Method of Evaluation: Per internship instructor; pass/fail (S/U only)

I have completed the following courses to qualify me for internship credit (see your advisor to determine this requirement):

<table>
<thead>
<tr>
<th>Course Prefix and #</th>
<th>Grade</th>
<th>Faculty Member</th>
<th>Program Coordinator Approval</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>(Print)</td>
<td>(Signature)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Date</td>
<td>Date</td>
</tr>
</tbody>
</table>

Supervisor __________________________ Program Coordinator __________________________
Date: __________________________ Date: __________________________

3. ENROLLMENT IN INTERNSHIP COURSE

File form at least 48 hours prior to regular registration deadline (BEFORE Add/Drop period)
(Note: Late Registration Fee policy)

<table>
<thead>
<tr>
<th>Title</th>
<th>Class #</th>
<th>Prefix</th>
<th>Course #</th>
<th>Credits (circle one)</th>
<th>To be graded as</th>
</tr>
</thead>
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<tr>
<td>ADV Internship</td>
<td>______</td>
<td>ADV</td>
<td>4941</td>
<td>1 2 3 4 5 6</td>
<td>S/U Only</td>
</tr>
<tr>
<td>COM Internship</td>
<td>______</td>
<td>COM</td>
<td>4941</td>
<td>1 2 3 4 5 6</td>
<td>S/U Only</td>
</tr>
<tr>
<td>JOU Internship</td>
<td>______</td>
<td>JOU</td>
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<td>1 2 3 4 5 6</td>
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<td>PUR Internship</td>
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<td>1 2 3 4 5 6</td>
<td>S/U Only</td>
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<tr>
<td>RTV Internship</td>
<td>______</td>
<td>RTV</td>
<td>4941</td>
<td>1 2 3 4 5 6</td>
<td>S/U Only</td>
</tr>
</tbody>
</table>

STUDENTS MUST SIGN: I have read and agreed to the condition of the internship program and of this agreement. I accept responsibility for payment of my semester tuition and fees by the published deadline. I understand that if I fail to pay my tuition and fees by the deadline, I will be charged a $100 late payment fee, my records will be put on hold, my account will be referred to a collection agency, and I may incur other financial consequences. I understand that internship is graded as S/U only and has no impact on my cumulative, major or UCF GPAs. I understand if I am not enrolled in any courses prior to add/drop week, I will be assessed a late registration fee of $100.

Student Signature __________________________________________ Date: ______________
NASSC Advisor Signature __________________________ Date: ______________