

**MUST BE LEGIBLE & FILLED OUT COMPLETELY IN PEN –
 CONTRACTS WHICH ARE ILLEGIBLE, INCOMPLETE, OR IN PENCIL WILL NOT BE CONSIDERED!!!!**

**SEATTLE PACIFIC UNIVERSITY
 PSYCHOLOGY INTERNSHIP LEARNING CONTRACT**

Valid for _____
 Quarter Year

~~~~MUST BE COMPLETED IN PEN and SIGNED BY THE PSY DIRECTOR OF INTERNSHIP BY THE END OF THE FIRST WEEK OF THE QUARTER~~~~

LAST NAME _____	FIRST NAME _____	MIDDLE INITIAL _____
MAILING ADDRESS _____	CITY _____	STATE _____ ZIP _____ PHONE (____) _____
STUDENT NUMBER _____	E-MAIL _____	GRAD DATE _____ MAJOR _____

SITE SUPERVISOR'S NAME & TITLE _____	
SUPERVISOR'S BACKGROUND (TRAINING & EXPERIENCE) _____	
ORGANIZATION _____	AMOUNT OF TIME PER WEEK FOR INTERNS' SUPERVISION _____
MAILING ADDRESS _____	CITY _____ STATE _____ ZIP _____
PHONE (____) _____	EMAIL ADDRESS: _____
HOURS PER WEEK PER INTERNSHIP _____	DATES OF INTERNSHIP _____ to _____ PAY FOR INTERNSHIP \$ _____/HOUR (optional)

DIRECTOR OF PSY INTERNSHIPS _____ Dr. Marcia Webb _____	DEPARTMENT _____ Psychology _____	PHONE _____ x2683 _____
CRN # _____ (Office Use Only)	SUBJECT CODE _____ PSY _____	COURSE NUMBER: _____ 4940 _____ No. of CREDITS FOR INTERN _____ (see below)

CHART OF CREDITS PER HOURS WORKED (over a 10 week quarter; Psychology Department guidelines)
 Please CIRCLE the number of credits you want in the space above, and CIRCLE below the number of credits, hours weekly and total hours.

Credits	Hours/Week	Total Hours
1-2	5	50
3	7.5	75
4	10	100
5	12.5	125

(Additional information required on back)

FOR OFFICE USE ONLY	
Registered by: _____	_____
Date: _____	_____

1. Meet with your internship supervisor to design the following coursework: PLEASE COMPLETE THIS SECTION THOROUGHLY!

- **LEARNING OBJECTIVES:** What do you want to get out of your internship (i.e., specific skills, knowledge, and experiences)? How will this site help you toward your overall vocational goals?

- **LEARNING ACTIVITIES:** Reading, research, writing, seminar attendance and other activities assigned at the site, either on or outside the job, you will do to meet the objectives above.

- **COURSE GRADE EVALUATION:** A description of your on-campus activities that your Faculty Sponsor will use in assessing your grade. All assignments are described in detail in the Psychology Internship Syllabus which students will receive during the course enrollment process.
 - Attendance at on-campus supervision
 - Internship Log & Journal
 - Readings & Summary
 - Reflection paper
 - Career & Calling Evaluation by intern
 - Called! Online Field Guide activities
 - Canvas course student feedback

2. **Required Signatures** *Signature indicates agreement by all parties to fulfill the terms of the internship described above.*

While this internship is part of my educational experience at Seattle Pacific University, I understand that SPU does not control the work environment at job or internship sites, and is not responsible for employment positions at these sites. I agree not to hold SPU liable for problems encountered as a result of my work at this internship site.

STUDENT _____ DATE _____
Print Name Signature

SITE SUPERVISOR _____ DATE _____
Print Name Signature

DIRECTOR OF PSY INTERNSHIPS _____ DATE _____
Print Name Signature

*Students under the age of 18 are not eligible for an internship without parent/guardian approval.

PARENT/GUARDIAN _____ DATE _____
Print Name Signature

3. After YOUR SITE SUPERVISOR SIGNS THIS, BRING IT TO PSY DIRECTOR OF INTERSHIP TO SIGN. The original will be forwarded to the Center for Career and Calling.
4. Prior to the end of the quarter, the CCC will email you an Intern Evaluation and Site Supervisor Evaluation Form with directions for completion.