



GRAPHIC DESIGN INTERNSHIP PROGRAM

***Agreement Regarding Placement of a Student in an Internship***

Student Name \_\_\_\_\_

Student's School Address \_\_\_\_\_

Non-SMSU email where student may be reached \_\_\_\_\_

Cell Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Home Address \_\_\_\_\_

Internship Name \_\_\_\_\_

Internship Address \_\_\_\_\_

Internship Phone \_\_\_\_\_ Internship Email Address \_\_\_\_\_

.....  
I agree to work as an intern at the above named employer during \_\_\_\_\_ Semester for a minimum of **120 hours**.\* I have been informed of the duties, responsibilities, and nature of the work I will be doing as an intern at the above named company or organization. I understand that this is a (circle one) **PAID** | **UNPAID** position. I also understand that the grade for this course will be submitted AFTER all requirements stated on the syllabus have been met, and all materials have been reviewed by the professor.

I have agreed to this internship, and have discussed course requirements with the student.

Professor Signature \_\_\_\_\_ Date \_\_\_\_\_

Student Signature \_\_\_\_\_

\*Note: Internship hours may be split between more than one employer, with professor approval, and this form must be completed for each separate internship.