

FIELD EXPERIENCE AGREEMENT
CJ 2861/2862/4860/4861

I. GOALS OF THE STUDENT: List at least three specific goals you wish to accomplish through this internship that you cannot achieve in a classroom setting. (These should be filled out prior to meeting with the agency supervisor.)

II. ACTIVITIES AND DUTIES. In consultation with the agency supervisor, list the nature of the activities and duties that will be assigned in conjunction with this field experience and how this might relate to the student's goals.

ACTIVITY

RELATIONSHIP TO GOALS

The student agrees to take responsibility for the terms of this agreement and the agency supervisor agrees to supervise and provide an evaluation for the student in the field experience, based upon the terms of this agreement.

Student Signature

Supervisor Signature

Student Name

Supervisor Name

Date: _____

Agency Name
(Please attach a business card if possible)

Semester/Year: _____

Date: _____