

**Weber State University**  
**Department of Athletic Training and Nutrition**  
**Field Experience Contract (Unpaid Position)**

The Weber State University Department of Athletic Training and Nutrition requires as part of its educational program that students complete a Field Experience where they provide athletic training or nutrition services to members of the public in association with an organization, institution or company. This is a real world application of the education they receive in the classroom and we believe this is an invaluable part of their education.

As a student of Weber State University within the Department of Athletic Training & Nutrition I, \_\_\_\_\_,  
(Full Name)

commit to an Cooperative Work experience with \_\_\_\_\_ located at  
(Name of Organization))

\_\_\_\_\_  
(Address, City, State, Zip Code)

\_\_\_\_\_ has consented to be my supervisor. The Field Experience will begin \_\_\_\_\_  
(Site Supervisor's Full Name) (Month, Date, Year)

and end \_\_\_\_\_ for a total of \_\_\_\_\_ weeks. I am contracting to work \_\_\_\_\_ hours per week, for a total of \_\_\_\_\_ hours.  
(Month, Date, Year) (Number) (Number) (Number)

My enrollment in NUTR 4860 ( \_\_\_\_\_ ) for \_\_\_\_\_ credit hours will be during \_\_\_\_\_.  
(CRN) (1 cr = 60 hours) (Term, Year)

During the Field Experience Student agrees to:

1. Be registered as a student pursuing an Athletic Therapy major within the ATN department.
2. Comply with the department's minimum Field Experience contact hours/credit hours requirement (60 contact hours/1 semester credit hour).
3. Comply with all policies and procedures and guidelines outlined by the Site Supervisor, course instructor and program director.
4. Meet all university and department requirements and assignments associated with this Field Experience.
5. Perform in a professional manner while performing duties and completing assignments associated with the Field Experience.
6. Not assert that Student is an employee of Organization. It is intended by the parties that Student is not an employee of the Organization and meets the six factor IRS test for unpaid interns as set forth in Fact Sheet #71: Internship Programs Under The Fair Labor Standards Act.

During the Cooperative Work Experience Organization agrees to:

1. Determine in discussion with Student the duties and responsibilities of the Student while participating in the Field Experience. The Field Experience is intended to be a substantive learning process for the Student and she or he should not generally be assigned to do menial tasks but should be involved in substantive professional activities of the Organization.
2. Supervise student during times he or she is performing the Field Experience .

Note: Documentation of General Liability and Workman's Compensation insurance for WSU interns can be provided upon request.

**Student Agreement:**

\_\_\_\_\_  
(Student's Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Student's Printed Name)

\_\_\_\_\_  
(Phone)

\_\_\_\_\_  
(Email)

\_\_\_\_\_  
(W#)

**Site Agreement:**

\_\_\_\_\_  
(Site Supervisor's Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Site Supervisor's Printed Name)

\_\_\_\_\_  
(Phone)

\_\_\_\_\_  
(Email)

\_\_\_\_\_  
(Title of Organization)

**Department of Athletic Training and Nutrition Agreement:**

\_\_\_\_\_  
( NUTR 4860 Instructor's Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
( NUTR 4860 Instructor's Printed Name)

\_\_\_\_\_  
(Phone)

\_\_\_\_\_  
(Email)

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For Weber State University use only: The signature of the AT 4890 Instructor above indicates that this Field Experience is approved by Weber State University as a health care clinical training program.