California State University, San Bernardino School of Criminology and Criminal Justice Internship Learning Agreement

Incomplete, handwritten, or late forms will not be accepted

Student Information

<u>Student information</u>							
Name: Last	First		Coyote ID:				
Address: Street	City		State		Zip		
Phone: () -		Email:					
Current Class Level:	Semes		er:		Year:		
Registration Information							
Declared Major: B.A. in Criminal Justice							
B.S. in Intelligence and Crime Analysis							
Have you completed a previous CJUS internship? Yes No							
 When? Semester		Year					

<u>internship Site information</u>			
Organization Name:	Phone:	-	
Address: Street	City	State	Zip
Supervisor Name: Last First			
Supervisor Title:	Email: (Require	ed)	
Internship Site Details			
Start Date of Internship: / /	End Date:	/ /	
Hours per week:	Compensation	: Paid	Unpaid \square

1. Job Description: What will be your specific responsibilities, projects, and/ or tasks?

- 2. Learning Plan: What do you expect to learn from this internship? Please list all your learning objectives, in the following areas:
 - a. Professional Learning
 - b. Academic Learning
 - c. Personal Learning

AGREEMENT

Please read and sign below.

Intern:

Checklist -- Refer to the following checklist and initial before submitting your ILA

- I have read and signed the release liability form, and all sections and lines of this form completed, dates and all required signatures specified where indicated.
- For withdrawals or incompletes during fall, spring, and summer internships, follow the dates on the Academic Calendar.
- Keep in mind how 3 credits will affect your course load. If you will be in credit overload, you must petition for a course overload.
- I understand I must complete a written report between 2,000-3,000 words and that my supervisor has to send in my evaluation at the end of the semester in order for me to receive a grade.

I agree with and accept the academic and work assignments within this agreement. I understand and will adhere to the internship registration procedure. I will complete all work and academic assignments to the best of my ability. I accept the obligation of confidentiality in my work and will familiarize myself with and adhere to the employer' relevant policies and procedures, including those pertaining to criminal background checks, and appropriate standards of ethical conduct.

COVID-19 Related Policies

Students are expected to adhere to CSUSB health and safety policies, including the COVID-19 protocol, DURING ther off-campus placements. This includes, among others:

- being fully vaccinated and having completed their online self-certification no later than September 20, 2021
- the use of face coverings, even if the site does not require them, and
- completing a daily Health Screen every day BEFORE the start of any CSUSB related activity

The most up-to-date COVID-19 information can be found https://www.csusb.edu/covid-19. Violation of these rules will be reported to Student Conduct.

Intern Signature	Date

Site Supervisor:

- I have discussed this internship with the intern and we have agreed upon the responsibilities, taks and assigned work components appearing above.
- Each internship includes a commitment on the part of the student of a minimum of 120 hours and up to a maximum of 200 hours.
- I agree to provide assistance, training, and consultation to the intern.
- I agree to provide a professional work environment for the intern so that the intern can progress toward the learning plan outlined above.
- I agree to complete an Intern Evaluation Form at the end of the internship.
- I am aware that the student must follow the CSUSB COVID-19 guidelines.

Site Supervisor Signature	Date

Please obtain required signatures & submit scanned copy of this document and the release liability form to