



Religion and Public Engagement Partner Program Agreement

Lucas Johnston, Director
RPE
Wake Forest University, Box 7212
Winston-Salem, NC 27109

Student Intern _____

Address _____

E-mail _____ Phone _____

Host Organization _____

Supervisor _____ Position _____

Address _____

E-mail _____ Phone _____

Wake Forest University Coordinators: _____ Lucas Johnston _____

Campus Address _____ Wake Forest University PO Box 7212 Winston- Salem, NC 27109 _____

E-mail johnstlf@wfu.edu _____ Phone (336) 758-3341

INTERNSHIP DESCRIPTION

1. What is the mission of the host organization?
2. Describe your role and responsibilities at the host organization.

LEARNING OBJECTIVES AND ACTIVITIES

Learning Objectives

- 3. Describe in detail what you hope to learn through this experience. Please set specific and tangible goals.

Learning Activities

- 4. Describe how your planned activities will enable you to meet your learning objectives.

SUPERVISION

By answering each question below, describe in detail the supervision that you will receive at the organization:

- 5. How frequently will you and your supervisor meet?
- 6. What kinds of interaction will you have between scheduled supervision meetings?
- 7. What kinds of training experiences will your supervisor provide?
- 8. To whom else will you report? What role will you play as a member of the office team?

EVALUATION

- 9. What criteria will be used to evaluate your performance?
- 10. How will this evaluation be conducted?
- 11. Who will complete the evaluation?
- 12. When will the evaluation take place?

AGREEMENT

By signing this form, you (the intern, the site supervisor and WFU) agree to the conditions stated above. The parties recognize that circumstances may arise that require a change in the Learning Agreement and that such changes may include removing the Student Intern or relocating the Student Intern to another Host Organization. Should such circumstances arise, then the parties agree to work collaboratively to resolve any conflicts or disagreement.

Intern signature _____

Date _____

Supervisor signature _____

Date _____

WFU Coordinator signature _____

Date _____