



WILKES UNIVERSITY

COOPERATIVE EDUCATION/FIELD EXPERIENCE

84 W. SOUTH STREET • WILKES BARRE, PA 18766

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EMAIL: interns@wilkes.edu. All applicable forms are available online at:

<http://www.wilkes.edu/coop>

ACADEMIC PROJECT AGREEMENT FORM

(TO BE COMPLETED WITH YOUR FACULTY COORDINATOR)

Describe your academic project. In agreement with your Faculty Coordinator, what will be your area of study and its focus? What guidelines will you follow, i.e. minimum/maximum number of pages, format, number and types of references?

Please check the methods that will be used to document evidence of learning during the internship/co-op.

- Presentation
- Project
- Paper
- Portfolio
- Other (Specify)

Please describe specifics of the evaluative methods chosen (frequency, length, subject matter, writing style, etc.)

Number of points deducted from grade each day project is submitted late: _____

STUDENT AFFIRMATION

I affirm that I have read, understand, and accept all terms outlined in the statement above.

By signing this agreement, I agree to:

- Complete all academic work detailed above or specified in the syllabus for the internship course.
- Adhere to the Wilkes University academic integrity policy when completing all work related to the internship.

Student Signature: _____ Date: _____

FACULTY COORDINATOR AFFIRMATION

I affirm that I have read, understand, and accept all terms outlined in the statement above.

By signing this agreement, I agree to:

- Advise the student based on the Learning Objectives, Learning Resources and Academic Work outlined in this agreement
- Assess the student's learning and achievement based on the completed academic work and performance on-site.
- Communicate with the Internship On-Site Supervisor regarding the intern's performance at the internship site on an as-needed basis.

Faculty Signature: _____ Date: _____