



Internship Agreement Form

Student Information

Name: _____ SJSU ID# _____
Email address: _____ Phone Number: _____
Address: _____
Major: _____ Expected graduation date: _____

Employer Information

Name of organization: _____
Address: _____
Phone number(s): _____
Website address: _____
Name and title of student's internship supervisor: _____
Supervisor's email address: _____

Internship Information

Type of Internship (Advertising, PR, Journalism, Social Media): _____
Semester of Enrollment in MCOM111: _____
Expected Start Date: _____
Expected End Date: _____
Compensation - Check One:
Salary: _____ per hour.
Course Fee Payment Cost: _____
Internship Stipend: \$ _____
Award: _____
Unpaid: Please Explain: _____

For academic credit students are required to work: 150 hours per semester, summer or winter session. Students may not extend their internship period into another term.

Signatures (Regular or Electronic Signatures Are Acceptable.)

We, the undersigned, agree to the terms of this internship as outlined in this document and its attachments:

Student: _____	Date: _____
Employer supervisor: _____	Date: _____
Faculty supervisor: _____	Date: _____

Please Attach

☐ Transcript (unofficial – pre-requisites confirmed) ☐ Internship Description on Company Letterhead Paper