

MASTER OF SCIENCE
STUDENT AFFAIRS ADMINISTRATION
SAA 595 INTERNSHIP
MEMORANDUM OF UNDERSTANDING

Date:

To: [Name and Title of Site Supervisor of Internship at Cooperating Institution]

From: [Name and B# of Student]

Re: [Memorandum of Understanding for SAA 595 Internship]

Elements to include:

- 1) Name, title and **full contact information** of location/organization, immediate supervisor, student, and Internship Coordinator Including phone numbers (cell, if available), addresses, and e-mail addresses
- 2) A statement that the required internship period must be at least 156 hours of service with specific start and end dates
- 3) Semester of graduation
- 4) Work conditions: hours and days of work, semester of internship course enrollment,

internship site, other work conditions as appropriate
- 5) Compensation information: hourly rate or total amount and method of payment (weekly, biweekly, lump sum, etc.) or statement that there will be no financial compensation
- 6) Academic goals and expectations of internship
- 7) Specific projects and task descriptions
- 8) Administrative functions in which intern will be engaged (e.g., program development, evaluation or implementation; policy development or analysis; financial review; strategic planning)
- 9) Expected work products or outcomes (include dates, if possible)

Site Information

the student with access to adequate information, assistance, and staff cooperation to enable the

This page must be completed for students completing an on-site internship during the 2023-24 academic year.