

SJSU School of Journalism & Mass Communications Internship Agreement

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): _____

Semester of Enrollment In MCOM111: _____

Expected Start Date: _____

Expected End Date: _____

Compensation: _____

Signatures

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) Internship Description on Company Letterhead Paper