

Professional Internship Confirmation Form

Student must turn this completed form in to the Studio Art Office or email it to studio@unt.edu to be enrolled in the appropriate class for the internship credit. The form is not complete without all three signatures. **The instructor of record cannot be the on-site supervisor.**

In which course are you enrolling?

- ART 4450 – Undergraduate Internship ART 5450 – Graduate Internship

How many credit hours? Note: 3 hours of credit is approximately 8-10 hours of work per week. 6 hours of credit is approximately 16-20 hours of work per week.

- 3 hours 6 hours

Is the internship paid or unpaid?

- Paid Unpaid

Student / Intern Information (to be completed by student)

Name _____ ID # _____

Email _____ Phone # _____

Semester / Year of Enrollment _____

My supervisor has reviewed the policies (pg. 1-15 in the CVAD Health and Safety Handbook) with me as well as the inherent hazards of my internship, best practices, links to more information, and the area rules.

I understand that I am responsible for the information within. I understand that a copy of the handbook may be found on the CVAD website: <https://forms.cvad.unt.edu/health-safety>

Student / Intern Signature _____ Date _____

Faculty Information

Instructor of Record _____

Instructor Email _____

Instructor Signature _____

On-Site Supervisor Information

Name _____ Title _____

Institution / Organization _____

Physical Address _____

City / State / Zip _____

Phone _____ Email _____

Continue on next page.

Describe the nature of the work / assignments the intern will perform.

I have agreed to serve as the On-Site Supervisor to the student listed on this form.

I agree to provide the UNT Department of Studio Art professor listed above with an evaluation of the intern's performance midway through the internship and a final evaluation at the conclusion of the internship.

On-Site Supervisor Signature _____ Date _____