



GOALS AND LEARNING OBJECTIVES FORM

Name _____ Date _____
Internship Site _____ Faculty Monitor _____

***Please complete this form at the beginning of your internship and submit on Blackboard.**

To be completed by the **student**:

Goals and Learning Objectives: *If you need help, you may consult your faculty monitor, the internship coordinator, or the Internship Information Form for your site. You will need to discuss these with your Site Supervisor to obtain his/her agreement.*

*Reflect on the results from your Initial self-assessment and compare them with the soft skills listed below. Create **5 goals** that will help you improve on the soft skills employers are requiring. Describe how your internship will enable you to reach your goals.*

- 1)
- 2)
- 3)
- 4)
- 5)

Critical Skills Employers Seek

- | | |
|--------------------------------------|---------------------------------|
| 1. Communications (oral, written) | 6. Digital Technology Literacy |
| 2. Teamwork/Collaboration | 7. Global/Intercultural Fluency |
| 3. Critical Thinking/Problem-solving | 8. Professionalism/Work Ethic |
| 4. Planning/Organizing | 9. Career Management |
| 5. Leadership/Management | 10. Adaptability |

To be completed by the Site Supervisor:

Supervision: Describe the supervision to be provided by the internship organization. What kind of orientation, instruction, assistance, consultation, mentorship, etc., will the student receive?

A. **Student Intern agrees to:**

1. Perform to the best of his or her ability and to the satisfaction of the internship supervisor all assigned tasks.
2. Adhere to all personnel rules, regulations, and other standard requirements of the host organization, including regular and punctual reporting to the internship site.

B. **Internship Supervisor agrees to:**

1. Work directly with the student and make explicit arrangements with the student concerning the expectations, hours, duties and overall goals described in this contract.

The signatures of the undersigned indicate the above agreements have been reviewed and approved. The student intern and supervisor acknowledge personal responsibility for the internship commitment. The student has been informed of any risks inherent in the work to be performed and knowingly consents to undertake such risks.

Signature of Student Intern: _____ Date: _____

Name of Site Supervisor: _____

Signature of Site Supervisor: _____ Date: _____

Organization: _____ Title/Position: _____

****This form is due at the beginning of the internship ****

****Please keep a copy for your records****

**** Please make a copy for your Site Supervisor****

The student's faculty monitor and the Internship Coordinator are available at any time to discuss concerns of the student or site supervisor.

Internship Coordinator: Holly Coffin, 630-617-6457 hollyc@elmhurst.edu