

Date: _____

EDDN 698 SBL

INTERNSHIP AGREEMENT (3/30/2017)

Name: _____

Home Address: _____

Phone #: () _____
Email: _____
District: _____

Site: _____

Position: _____

Site Supervisor: _____

Faculty Advisor: _____

Site Supervisor's Email: _____

Site Address: _____

Site Phone #: () _____

Fax #: () _____

The student indicated above has been approved for participation in the internship program in School Administration and Supervision at Touro College. The student agrees to comply with all regulations of the New York State Department of Education regarding college sponsored and school supervised internships. The New York State certified school supervisor or administrator indicated above will supervise the intern on site.

The intern will be responsible for:

1. Attending a mandatory **internship orientation session**.
2. Attending one mandatory **three hour seminar**.
3. Maintaining a **daily log** of internship activities that are supervisory or administrative in nature. This *must* follow prescribed format.
4. Implementation of **action research paper**.
5. Complete a **reflection paper** that analyzes how you believe the Touro College experience prepared you for school building/district leadership.
6. Presenting all work in a **bound portfolio**.

The internship will require a total of three hundred (300) hours. The site supervisor will supervise the intern on a daily basis and will confer with the Faculty Advisor. The intern will be visited by a Faculty Advisor twice during the semester for the purpose of reviewing the intern's performance.

Signatures:

Intern: _____

Date: _____

ty Advisor: _____

Date: _____