

PEPPERDINE UNIVERSITY

School of Public Policy

Internship Agreement

This internship agreement will act as a preliminary agreement between the School of Public Policy Student interns and the company/agency for whom they intern. This agreement will help to clarify the duties and responsibilities interns agree to perform, and serve as verification of employment. Please fill in all sections completely and sign and date the form.

Student name: _____ Year of graduation: _____

Internship title: _____

Agency name: _____

Agency address: _____

Agency phone number: _____ Agency website: _____

Supervisor's name and title: _____

Supervisor's phone number and email: _____

Dates of internship: _____ Hours/week: _____

Internship location: _____ Compensation (if any): _____

Description of duties and responsibilities(if more room is required please use the back of this page):

Please note: In order to satisfy the requirements for the Master of Public Policy, students must complete a minimum of 240 hours of substantive, policy-related work.

Agency supervisor signature: _____ Date: _____

Student signature: _____ Date: _____