Internship Proposal  
Memorandum of Understanding (MOU) for Sponsors, Interns, and the Internship Program at Georgia State University, Department of English

Mission: To help sponsoring organizations and interns benefit as much as possible from the internship experience, we are asking that a representative of the sponsoring organization (usually the intern’s writing mentor or project manager) and the intern fill out this form at the time the sponsoring organization offers an internship and the intern accepts it. The intern should send a copy of the signed document to Dr. Melissa McLeod (mmcleod1@gsu.edu), Department of English, Georgia State University.

Please type or print clearly when completing this form

Intern Contact Information:

Intern’s Name: ________________________________________________________
Intern’s Phone Number: _________________________________________________
Intern’s Email Address: _________________________________________________
Intern’s Panther Number: _______________________________________________
Internship Dates/Term: _________________________________________________

The Sponsoring Organization
Name of the sponsoring organization:

_____________________________________________________________________

Address, telephone number, and email address of sponsoring organization:

_____________________________________________________________________

_____________________________________________________________________

Mentoring for the Intern
Name, title, and contact information for intern’s writing mentor and supervisor (if different from the SO):

_____________________________________________________________________

_____________________________________________________________________

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The Sponsoring Organization’s Work and the Intern’s Responsibilities
Nature of the sponsoring organization’s work:

________________________________________________________________________

________________________________________________________________________

Description of projects to be assigned to the intern during the fifteen weeks in fall or spring semester or fourteen weeks in the summer. (Internships may be longer, or may be adjusted to meet special circumstances.)

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Assurances from the Sponsoring Organization (SO)
Signature (below) of the internship mentor indicates agreement to the five following stipulations:
• The SO’s mentor will meet weekly to discuss the progress of the intern’s work.
• The SO will allow the intern to share samples of his/her work in the internship report.
• The SO will provide the intern with an appropriate orientation to the organization.
• The SO will evaluate the intern at five weeks.
• The SO will evaluate the intern at the end of the internship.

Additional stipulations for this internship (attach if necessary):

________________________________________________________________________

________________________________________________________________________

(Please type or print name) (Please sign)
For the sponsoring organization

Date: ____________________________

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Assurances from Intern
Signature (below) of the intern indicates agreement on the following stipulations:

• That the work assigned for the internship period is consistent with his/her professional goals.
• That he/she will perform the work specified described above.

__________________________  ______________________
(Please type or print name)  (Please sign)
Intern

__________________________
Intern’s Panther Number

__________________________
Intern’s Phone Number/email

Date: _______________________

When you have completed your internship, would you be willing to respond by email to other students who might like to know about your experience?

Yes________
No _________