

PS 99 Application and Internship Agreement Form

Political Science 99: Field Work in Politics
Department of Political Science, Tufts University
2011

This form must be completed by all students wishing to enroll in PS 99. Please type or print neatly. This form is due the second week of classes unless otherwise agreed upon with the instructor.

PART I: STUDENT INFORMATION

Name: _____

Tufts ID Number: _____

E-mail Address _____

Matriculation Date: _____

Expected Graduation Date: _____

Intended Degree: BA or BS (circle one)

Major: _____ Minor: _____

Certificate Program: _____

PART II: INTERNSHIP INFORMATION

Employer or Internship Sponsoring Organization: _____

Street Address: _____

PO Box or Mailing Address (if different from street address):

City : _____ Zip Code: _____

Telephone Number: _____

Name of Employer or Internship Supervisor _____

Employer or Supervisor's Job Title: _____

Is the position paid or unpaid? _____

Did you obtain this internship placement through the Department of Political Science?

YES NO (Circle one)

If the proposed internship position was NOT obtained from the Political Science Department's internship listings, please describe the position. Include the specific responsibilities of the position and the number of hours per week. If you like, you can submit this on a separate piece of paper.

PART III: RELATED POLITICAL SCIENCE COURSES

Foundation Course (or Courses) in Political Science (courses numbered between 10 and 79)

(1) _____

(2) _____

Additional Related Course in Political Science (optional)

Course Number _____

Course Title _____

Year and semester taken: _____

PART IV. PERSONAL STATEMENT (MANDATORY)

On an attached sheet, please briefly discuss how your proposed internship position relates to your undergraduate experience at Tufts, in general, and to your prior political science courses, in particular. You might use the following questions as a basis for your statement: (1) What skills or experiences do you hope to gain from this internship? (2) What are the mission and goals of the organization and agency, both actual and stated? (3) How might this internship allow you to explore topics, concepts and theories you first encountered in political science classes? (4) What are your tentative post graduation plans and how might this internship help you refine them?

PART V. INTERNSHIP AGREEMENT FORM

This part must be completed by both the student and the internship supervisor or employer, before the student

is officially registered for Political Science 99.

By signing below the student affirms that:

- The employer/internship sponsor has hired me for the position stated earlier on this form.
- I understand that both actual internship and the written assignments are components of Political Science 99, and that my course grade will depend on both the supervisor's evaluation of my job performance and the instructor's evaluation of my papers. I understand and accept responsibility for both portions of this course.
- I understand and accept the responsibilities described in the position description and will conduct myself in a professional manner at the internship site. I further understand that my resignation or termination of the internship/employment prior to the end of the semester may result in a zero for that portion of the course, and thus a failing grade for PS 99.

By signing below the employer/supervisor affirms that:

- The student named on this form has been hired for the position stated earlier on this form.
- I understand that both the actual internship and the written assignments are components of Political Science 99, and that the student's course grade will depend on both the my evaluation of the student's job performance and the instructor's evaluation of the student's written work
- I agree to provide a written evaluation of the student's performance (including a letter grade) on the form provided by the Tufts Political Science Department, and to return that evaluation to the instructor by the date stated on the form.

Students Signature: _____ Date: _____

Employer/Supervisor's Signature: _____ Date: _____

Instructor's Signature: _____ Date: _____

