

**Hobart and William Smith Colleges**  
**Collaborative Internship Program (GCIP401)**  
Agreement Form – Faculty Sponsor and Academic Advisor

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Name of Student (please print): \_\_\_\_\_

Signature of Student: \_\_\_\_\_ Date: \_\_\_\_\_

Worksite: \_\_\_\_\_ Project: \_\_\_\_\_

Major or Minor to which this internship will apply: \_\_\_\_\_

The above named student is applying for a Collaborative Internship through Hobart and William Smith Colleges. The program requires that students be able to work independently, be sensitive to the needs of others, be academically secure, work well with diverse populations, and be counted on to follow through on tasks to which they may commit themselves. Please complete this form (typed or word-processed) and return it to the **Salisbury Center for Career Services by the last day of the add/drop period**. You may use the back of this form or an attached sheet if necessary.

Work Assignments Required by the Student:

GRADING OPTIONS (please circle one):      Credit or No Credit                      OR                      Letter grade

Faculty Sponsor name: \_\_\_\_\_

Faculty Sponsor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Advisor name: \_\_\_\_\_

Advisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Thank you! Please return to Brandi Ferrara, 1s Floor, Trinity Hall by the end of the add/ drop period.**

Approved for Collaborative Internship (GCIP401) by CSO Staff: Brandi Ferrara Date: \_\_\_\_\_

CSO Staff Signature: \_\_\_\_\_ Date: \_\_\_\_\_