

UNA Experiential Learning Program Undergraduate Application



Date _____

Personal & Contact Information:

Course Name: _____

Name (Last, First, Middle) _____

Student Banner L# _____ Date of Birth _____

Local Address _____ City _____ State _____ Zip _____

Permanent Address _____ City _____ State _____ Zip _____

Mobile # _____ Other # _____ Campus Box # _____

UNA Email _____ Other Email Address _____

Do you have a LionJobs Account? YES NO Do you need help accessing your account? YES NO

Degree Information:

Major _____ Minor _____

Projected Graduation Date _____ Academic Advisor _____

Overall GPA _____ Major GPA _____

Experience Information: Please circle

Semester desired for Experiential Learning: FALL SPRING SUMMER YEAR _____

Experiential Learning type: Internship Externship Undergraduate Research
Professional Practice COOP Other _____

Intended Employer (Company Name) _____

Primary Contact _____ Phone/Email _____

*** FOR ACADEMIC CREDIT STUDENT MUST** have permission from the Department Chair in your major and must meet all other departmental requirements. Take this form to your Department for completion of this section.

Approved By _____ Date _____
Department Chair in your major

Course Name _____ Course Number _____ CRN _____

After academic credit has been approved, please see the department secretary for course permit in order to register.

Permitted by Administrative Assistant _____ Date: _____

I have registered the student: YES NO

If you are not authorized to work in the U.S., you will require permission from a Designated School Official in the Office of International Affairs and authorization on your I-20 before you can begin any position in the U.S. The Career Center can help you prepare the job information and then you will need to meet with a DSO for approval as CPT (Curricular Practical Training). To be eligible as CPT, the position and job responsibilities must be directly related to your education and studies. You may also consider asking about the Cooperative Education Program if you do not need academic credit.

Signature of Department Chair or Department Authorized Signee _____

Date _____

Please indicate that you have read and understand each section below by signing your initials in the space provided.

_____ I understand that applying to participate in UNA's Internship Program does not guarantee acceptance into the program nor does it guarantee employment as an Experiential Learning student. I acknowledge that the University is not my employer nor does it determine the final selection, hiring, or direct supervision of me as an internship student. The University is not liable for on-the-job injuries or adverse employment problems.

_____ I understand that in order to receive academic credit for this experience I must submit a complete application package to the Career Center *prior to beginning work*. I must also contact my academic advisor and/or department chair prior to registering for classes.

_____ I understand that this form is only part of the information required to participate in the Experiential Learning Program. Participation is not approved/finalized until (1) this 2-page application form, employer memo of understanding, and job description are submitted and approved, and (2) I am properly registered for the approved Experiential Learning course.

_____ I understand and agree that the Experiential Learning Program provides opportunities for either part-time or full-time participation. I further agree that I am participating in the Program to enhance my educational experience toward completion of an academic degree. While not working in the Experiential Learning position, I will be pursuing a degree on a substantially full-time basis to the extent that I am able.

_____ I agree that upon accepting an Experiential Learning position, I will complete my work assignment in full. In case of extenuating circumstances, I will notify (in advance) the Career Center and my employer of any necessary alterations of the work assignment. I also understand I must work the required number of hours designated by my faculty during the tenure of the academic term.

_____ I understand that if I am enrolled in less than 12 hours, I must talk to Student Financial Services before beginning my Experiential Learning program regarding my financial aid eligibility.

_____ I agree to remain academically responsible during the tenure of my experiential education experience and that I am required to complete assignments via Canvas and the LionJobs Experiential Learning Module.

_____ I understand I am held accountable to the University Code of Conduct and University policies.

_____ I understand that the University of North Alabama has an expectation of mutual respect. Students are entitled to a working environment and educational environment free of discriminatory harassment. This includes sexual violence, sexual harassment, domestic and intimate partner violence, stalking, gender-based discrimination, discrimination against pregnant and parenting students, and gender-based bullying and hazing. UNA's policies and regulations covering discrimination and harassment may be accessed at www.una.edu/titleix.

I hereby authorize, pursuant to section 438(b)4(B) of the Family Education Rights and Privacy Act of 1974, Career Planning and Development to obtain and to release, on my behalf, to actual and prospective employers, such information contained in my academic records as is necessary to aid such employers in assessing my potential and eligibility for Co-op/Internship positions. I understand that at an employer's request Career Planning and Development will furnish student grades to my employer.

I have read and understand all statements in the application. I also certify that all information provided is true and accurate to the best of my knowledge.

Student Signature _____ Date _____

**UNA Experiential Learning Program
Memorandum of Understanding**



_____ Organization/Employer (please print)	_____ UNA Student (please print)
_____ Organization/Employer Liaison (please print)	_____ Student's Major (please print)

The Organization/Employer Agrees to:

- Select applicants in accordance with Equal Employment Opportunity Commission principles
- Follow the Department of Labor's Fair Labor Standards Act regarding compensation
- Designate a staff member as a Experiential Education liaison and/or supervisor
- Provide a job description that outlines progressive work assignments related to the student's academic program
- Establish work schedules consistent with UNA's academic calendar and allowing flexible hours for class attendance
- Orient the student to the employer's mission, policies, and procedures
- Process all personnel actions, keep necessary records, and originate any necessary contracts
- Conduct appraisals, counsel students regarding their performance, and complete an end-of-term evaluation
- Notify UNA of any change in a student's status
- Understands UNA's Policy and Procedures: Equal Opportunity, Harassment and Nondiscrimination as outlined at www.una.edu/titleix

The Student Agrees to:

- Adhere to the employer's work schedule, and all other policies and procedures
- Assume personal and professional responsibilities for actions and activities
- Meet academic and performance standards set forth by UNA and the employer
- Continue compliance with the University Code of Conduct and University policies
- Follow class syllabus requiring progress reports of experience and knowledge gained
- Keep confidential such matters as the employer may reasonably request or expect
- Notify the school and employer of any change in status
- Understands UNA's Policy and Procedures: Equal Opportunity, Harassment and Nondiscrimination as outlined at www.una.edu/titleix

The University Agrees to:

- Designate a representative to work with the employer liaison
- Advertise position openings via LionJobs
- Furnish the employer with requested information related to student's field of study and academic standing
- Monitor academic progress and evaluate student's experience at the end of internship
- Where applicable, grant student the appropriate credit hours and letter grade based on the supervisor's evaluation and course syllabus
- Inform the employer of any change in a student's status

Whereas the Organization/Employer and the University of North Alabama are interested in cooperating to provide an enriching Experiential Education program for the student, this memorandum has been prepared to set forth each party's understanding of the responsibility each is undertaking. As indicated by the signatures below, all parties agree:

- To a successful program for the stated term only
- To a fluid program with the prospect of additions and/or changes as needed
- If the program should for any reason fail to fulfill objectives, parties agree to terminate the experiential learning relationship upon request of any of the parties.

UNA Student _____ Date _____

Organization Liaison _____ Date _____

University Liaison _____ Date _____

