MURP/TRNS 6800 Internship: Work Plan and Agreement

STUDENT INFORMATION

	3.1			
Name			Campus ID	
Degree Program	Email		Telephone #	
SEMESTER & YEAR: FACULTY ADVISOR:		ont and School)		
AGREEMENT (betweer		•		C 1 11 1
Arts, Master of Urbar at the University of N	n and Regional Planr lew Orleans. We wo , 202 and o	ning Program or Massuld like the intern to complete his/her inte	te Internship in the Colle ter of Science in Transpo begin his/her "official in ernship experience by	rtation Program
The intern will work _	hours/we	eek for a total of 160	hours.	
WORK PLAN:				
skills and knowledge that describes:	relevant to the inter	rnship's professional	ovide opportunity to gain realm. Please attach a s	
1. The type of projects and tasks to be undertaken as part of the internship				
2. Knowledge and skills to be gained through the internship				
_	e "Professional Supe	ervisor's Responsibil	ities" and to submit an e	valuation of the
intern's work	T			
Organization Name				
Address				
	CITY STATE ZIP		IP	
Supervisor Name				
Supervisor Position				
Telephone #	Email Address			
Fax #		Website		

Please Return To:

MURP or MST Faculty Advisor (as appropriate) Department of Planning and Urban Studies University of New Orleans 2000 Lakeshore Dr. New Orleans, LA 70148

MURP/TRNS 6800 Internship: Work Log

Work log is to be kept by student intern and returned to the MURP faculty advisor after approval by intern's supervisor. Students may create their own work log form as long as it includes all of the information below.

Student Name:				
Organization:	Internship Supervisor:			
Faculty Advisor:	Semester/year registered:			
Complete one row for each week of internship				

Week (dates)	Hours worked	Brief summary of work

		Total Hours:
Please Return To: MURP or MST Faculty Advisor (as appropriate) Department of Planning and Urban Studies University of New Orleans		STUDENT SIGNATURE
2000 Lakeshore Dr. New Orleans, LA 70148		SUPERVISOR'S SIGNATURE

MURP/TRNS 6800 Internship: Supervisor Evaluation

To be filled out by supervisor and returned to MURP faculty advisor

Intern Name:	Supe	ervisor:			
Organization:					
	(Mark Appropriate Number)				
Please rate the following	Favorable			No	ot Favorable
Intern was cooperative?	1	2	3	4	5
Intern was productive?	1	2	3	4	5
Intern managed time efficiently?	1	2	3	4	5
Intern worked on own initiative?	1	2	3	4	5
Intern communicated well?	1	2	3	4	5
Intern showed problem-solving abilities?	1	2	3	4	5

Please answer the following questions:

- 1. Do you recommend that the student receive credit for this internship?
- 2. Was the intern academically prepared for this internship? If not academically prepared, what areas were weak or missing?
- 3. Were there major changes in the intern's activities from what was originally conceived? If yes, please explain.
- 4. What aspects of the intern's overall performance were most positive?

5.	In your opinion, is the intern ready to move on to an entry-level professional position in the area of his internship? If not, what skills and competencies need improvement?
6.	Would you recommend changes in the Urban and Regional Planning/Transportation internship coordinator's role in your internship?
7.	Do you give permission for your comments on this form to be shared with the intern? (This isn't required, but please indicate if you would NOT like the comments shared.)
8.	Please add any other comments, as pertinent, regarding either the intern's performance or potential, or the internship program.