



## EMPLOYER PARTICIPATION INTERNSHIP AGREEMENT THE DEPARTMENT OF JOURNALISM

Company/Organization: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ E-Mail: \_\_\_\_\_

\_\_\_\_\_ This is a minority-owned business/organization

Department Head: \_\_\_\_\_ Internship Supervisor: \_\_\_\_\_

We wish to participate in the University of Wisconsin-Oshkosh Department of Journalism Professional Internship Program by employing an intern in supervised work situations. We agree to provide approximately 200 hours of work. We understand the intern may work full or part time, 10 to 40 hours per week, during the summer or during the fall or spring semester. We will coordinate the work schedule with the student's class schedule. An appropriate member of our staff will provide an evaluation of the student's performance.

In addition, we agree NOT to require any student intern to sign any non-compete contract or agreement that prohibits the student intern from subsequently working with our competitors, clients, vendors, or any other person related to our business for any length of time.

Name of student selected: \_\_\_\_\_

Job categories in which the intern will work (please attach a job description if space is inadequate):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dates of employment: \_\_\_\_\_ to \_\_\_\_\_

Will student be paid? Yes ☐ No ☐ If so, how much? \_\_\_\_\_

We understand that the internship is a pay optional program (although pay is strongly recommended).

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

**Return to: Jean Giovanetti, Internship Coordinator**  
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