

Department of Applied Economics
Special Project Experiential Learning (AEC 406) Agreement Form

Special Project Begins (Date) _____ Ends _____ AEC 406 Credits (1-6)

A. Student Information (Please type or print clearly)

Student's Name _____

Address _____ Phone _____

_____ Email _____

B. Organization or Firm Contracting or Requesting Project (Company/Agency/Organization)

Employer Name _____ Student's Job Title _____

On-Site Supervisor _____ Title _____

Address _____ Phone _____

Salary or fee _____ Expected project duration _____ Email _____

Description of Work/Tasks to be Performed (List the jobs or tasks the student will be expected to complete)

Examples: Student will perform detailed financial analysis of the business. Formulate a business plan for expansion.

1. _____

2. _____

3. _____

4. _____

C. Student's Learning Objectives (List what you want to accomplish by the end of the project)

Examples: I want to learn how to perform a market assessment for a new product line. I want to understand the regulatory environment for ABC industry.

1. _____

2. _____

3. _____

4. _____

D. On-Site Supervisor's Responsibilities to the Student (How will employer help student to successfully fulfill project tasks and learning objectives)

Examples: Clearly communicate expected project deliverables and scope of work. Provide weekly project progress evaluations.

1. _____

2. _____

3. _____

4. _____

Student signature _____ Date _____

On-Site Supervisor signature _____ Date _____

Faculty Advisor signature _____ Date _____

(Learning objectives & overall project approved)

Suitability for future, similar projects? Yes _____ No _____

I.E. coordinator post-completion comments: