

**CRIMINOLOGY, LAW, AND JUSTICE INTERNSHIP PROGRAMS  
UNIVERSITY OF ILLINOIS AT CHICAGO**

Memorandum of Agreement between UIC student and Agency

Date \_\_\_\_\_

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**Student Information**

Name \_\_\_\_\_ Telephone \_\_\_\_\_  
Address \_\_\_\_\_ UIN # \_\_\_\_\_  
\_\_\_\_\_ E-mail \_\_\_\_\_

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**Agency Information**

Name \_\_\_\_\_ Supervisor \_\_\_\_\_  
Address \_\_\_\_\_ Telephone \_\_\_\_\_  
\_\_\_\_\_ E-mail \_\_\_\_\_

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**Agreement**

\_\_\_\_\_ has agreed to work from \_\_\_\_\_ to \_\_\_\_\_ for  
(student's name)

\_\_\_\_\_ (starting date) (ending date)  
hours a week performing the following agreed upon tasks as part of the field learning experience:

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

**TRAINING AND ORIENTATION**

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

**SPECIAL AGENCY REQUIREMENTS (IF APPLICABLE)**

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

**NOTE: In the event of illness or emergency the student will contact the agency supervisor. The student will be responsible to fulfill requirement and commitments to agency as described above.**

Signed: \_\_\_\_\_ (Agency Supervisor)  
\_\_\_\_\_ (Student)

**NOTE:** Students should return this completed form to a Social Science Advisor, 8th floor of UH