

**AMDP INTERNSHIP CONTRACT**  
**CADS 4920**

**Internship in Apparel Merchandising, Design and Production Management**

**This contract, resume, academic credit check, Internship Compensation Form, Permission to Use Student Work Form, Hold Harmless Form, and Dining Exemption form must be submitted together.**

**Return to Dr. Ulrich** 308 Spidle Hall, Auburn University, AL 36849-5603; fax: 334-844-1340;  
ulricpv@auburn.edu

Name \_\_\_\_\_ AU student ID # \_\_\_\_\_ Email \_\_\_\_\_

Cell # \_\_\_\_\_ Prerequisite: CADS 3750 taken (year/term) \_\_\_\_\_

INTERNSHIP: Firm Name: \_\_\_\_\_ Dept. (if appropriate) \_\_\_\_\_

Date internship will begin: \_\_\_\_\_ will end: \_\_\_\_\_

Address (street & city/state) of firm: \_\_\_\_\_

Firm Supervisor's  
Name & Title: \_\_\_\_\_

Supervisor's Phone \_\_\_\_\_ Email \_\_\_\_\_

**I have carefully read the requirements for enrollment in CAHS 4920 and have met all of these requirements. I understand and agree to the following:**

\_\_\_\_\_ I agree to complete all internship requirements. I understand that my grade will be penalized if I do not submit all course-related work by the deadline designated by my faculty supervisor.

\_\_\_\_\_ Any change in my work assignment (e.g., change of department, supervisor) will be communicated immediately in writing to my faculty supervisor.

\_\_\_\_\_ **I understand that I may take no other class during my internship without written approval from the Department Head**, that I must have a 2.0 GPA to complete this internship, and that I will be dropped from the internship if my GPA is not at least 2.0 at the beginning of the term I am to intern.

Student: \_\_\_\_\_ Date: \_\_\_\_\_

Firm Supervisor: \_\_\_\_\_ Date: \_\_\_\_\_

Program Coordinator \_\_\_\_\_ Date: \_\_\_\_\_

CADS Department Head: \_\_\_\_\_ Date: \_\_\_\_\_