

**Film Production / Film Animation / Film Studies**  
**PROFESSIONAL INTERNSHIP AGREEMENT**

**DIRECTIONS:**

The first section of the form is to be filled out and signed by the **Intern (student)** and **Field Supervisor** prior to the start of the Professional Internship. The Intern must retain the original of this Agreement and, one week prior to completing the Internship, ensure the second section is completed by his/her Field Supervisor and submitted (along with a **Final Report**) to the Cinema Office (FB 319) with copies to his/her Faculty Supervisor and Field Supervisor.

**Name of Intern (print):** \_\_\_\_\_

**Name of Employer/Field Supervisor (print):** \_\_\_\_\_

**Name of Company/Institution:** \_\_\_\_\_

Type of Intern Position: volunteer  paid

Duration of the Internship placement: \_\_\_\_\_ days

Number of working hours (min. 135 for 3-credit Internship): \_\_\_\_\_

Period of Internship:

Start date: \_\_\_\_\_ End date: \_\_\_\_\_

Location where the Internship will take place (complete address):

\_\_\_\_\_

If internship is remunerated:

Remuneration/hour : CAD \$ \_\_\_\_\_ / other currency \_\_\_\_\_

Process for claiming expenses (if applicable) \_\_\_\_\_

Mentorship and Training:

Type of mentorship and/or training (please select and specify):

- First-day orientation
- Assessment of skills
- Negotiation of tasks
- Introduction to other staff
- Written illustration of working procedures
- Oral explanation of working procedures
- Outlining of objectives
- Explanation of health and safety in the working place
- Other \_\_\_\_\_

\_\_\_\_\_

**Objectives**

To be completed by the Field Supervisor (please select and specify):

- Regular meetings
- Short written reports
- Oral reports
- Briefings with staff
- Other: \_\_\_\_\_

**Signature of Field Supervisor:** \_\_\_\_\_

**Date: (y/m/d/)** \_\_\_\_\_

**Signature of Intern:** \_\_\_\_\_

**Date: (y/m/d/)** \_\_\_\_\_

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**Internship Final Assessment**

This section is to be completed by the Field Supervisor at the end of the Internship.

1. Number of hours completed: \_\_\_\_\_

2. Main tasks:

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

3. Observations/Comments:

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

**Name of Field Supervisor (print):** \_\_\_\_\_

**Signature of Field Supervisor:** \_\_\_\_\_

**Date: (y/m/d/)** \_\_\_\_\_

**Name of Intern (print):** \_\_\_\_\_

**Signature of Intern:** \_\_\_\_\_

**Date: (y/m/d/)** \_\_\_\_\_