AH 6299: Internship Checklist
Department of Fine Arts and Art History
The George Washington University

Student’s Name: ________________________________

Student’s Email: _______________________________________

Student’s GWid: _______________________________________

Sponsoring Museum/Dept: _________________________________

Address: ____________________________________________

Supervisor Name/Title: ________________________________________

Supervisor’s Number: (______) ______ - ______ x _____

Supervisor’s Email: _________________________________

Beginning Date: _______________________________________

Semester Registered: _______________________________________

Documents Required for Internship Approval

- Internship Checklist *Immediately
- Supervisor’s C.V. *Immediately
- Timetable *Immediately
- Statement of Expectations *Immediately
- Midterm Progress Report Usually After 130 hrs
- Final Evaluation Usually After 260 hrs

Required documents, including this checklist, should be sent to: Cristin McKnight Sethi
Director of Graduate Studies
Department of Fine Arts and Art History
The George Washington University
Smith Hall of Art Suite A-101
801 22nd Street, NW
Washington, DC 20052
cristin@gwu.edu

Although the above material requires the supervisor’s participation, it is ultimately the intern’s responsibility to ensure that all appropriate paperwork reaches the graduate advisor in a timely manner.

*If material marked immediate is not received within one week of the start of the internship, academic credit may not be awarded.

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Internship Timetable Agreement

A (3) credit hour internship must total (260) working hours. Usually this takes the form of a 13-week session with the intern working 20 hours per week. However, as long as the total hour requirements are met, the intern and the supervisor may establish a mutually agreeable work schedule.

Each internship must be approved by the Director of Graduate Studies.

1. The internship will begin _______________ and end _______________.
   MM/DD/YYYY   MM/DD/YYYY

2. In general the intern will work _________ hours per day, _________ days per week.

3. The supervisor and the intern will meet _________ hours per week.

4. The internship will be for ________ credit hour(s) and consist of _______ hours of work.

____________________________________   ______________________________________
Supervisor’s Name (printed)                FAAH Intern’s Name (printed)

____________________________________   ______________________________________
Supervisor’s Signature                      FAAH Intern’s Signature

Date: _______________                      Date: _______________

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Statement of Expectations

Supervisor: Please discuss the main objectives of the internship with the student before the internship begins. This statement should represent an agreement between you and the intern regarding the expectations for the internship.

1. Describe the internship. Specifically mention the process of orientation, major activities to be completed, final projects and overall intern responsibilities. As appropriate, a “Suggested Readings” list may be included.
   (Attach document if needed.)

Note: If publications result from student research, interns should be properly acknowledged for their contributions.

__________________________________________________________________________
Supervisor’s Name (printed)                                      FAAH Intern’s Name (printed)

__________________________________________________________________________
Supervisor’s Signature                                      FAAH Intern’s Signature

Date: _______________                                      Date: _______________

Although the statement requires the supervisor’s participation, it is ultimately the intern’s responsibility to ensure that a statement is created at that it reaches the Director of Graduate Studies in a timely manner.

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Mid-term Progress Report

The mid-term evaluation provides the opportunity for the internship supervisor and the FAAH student to reflect on the progress of the internship and reassess the remaining activities to be completed by the intern. The evaluation also allows the Director of Graduate Studies to monitor the progress of the internship and address any problems. (Attach additional document if needed.) This form is due after half of the internship hours have been completed by the intern.

Intern’s Name: ________________________________

Sponsoring Museum/Gallery: ________________________________

Supervisor’s Name: ________________________________

1. Overall Evaluation of Performance

2. Mid-term Recommendation

3. Remaining Goals and Objectives

Supervisor:
Please check any that apply

_____ I have reviewed this report with the intern.

_____ I would like the graduate advisor to review this report with the intern.

_____ Please have the graduate advisor contact me for further discussion.

____________________________________  _________________________
Supervisor’s Signature  Date

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Final Evaluation Letter

The Director of Graduate Studies will assign a final grade (pass/fail) based on the mid-term evaluation, final evaluation and the student’s final project. The observations and comments made by the supervisor are critical to assigning this grade. Suggested questions to include in the final evaluation are listed below. *The Final Evaluation letter is due within two weeks of the final day of the internship, or, if the intern is in her/his final semester, by the final due date for grades.*

1. Did the intern have the opportunity to interact with appropriate staff members? What was the nature and quality of the interaction?

2. On what specific projects did the intern work? Were the projects ongoing or special? Were the tasks completed? Did the intern make a real contribution to the project?

3. Did the intern demonstrate (or acquire) skills useful in the museum or gallery environment (writing ability, research ability, communication skills, organization skills, teaching ability)?

4. What additional skills or information would you recommend to further the student’s professional preparation?

__________________________________________  ____________________________
Supervisor’s Signature                      Date

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