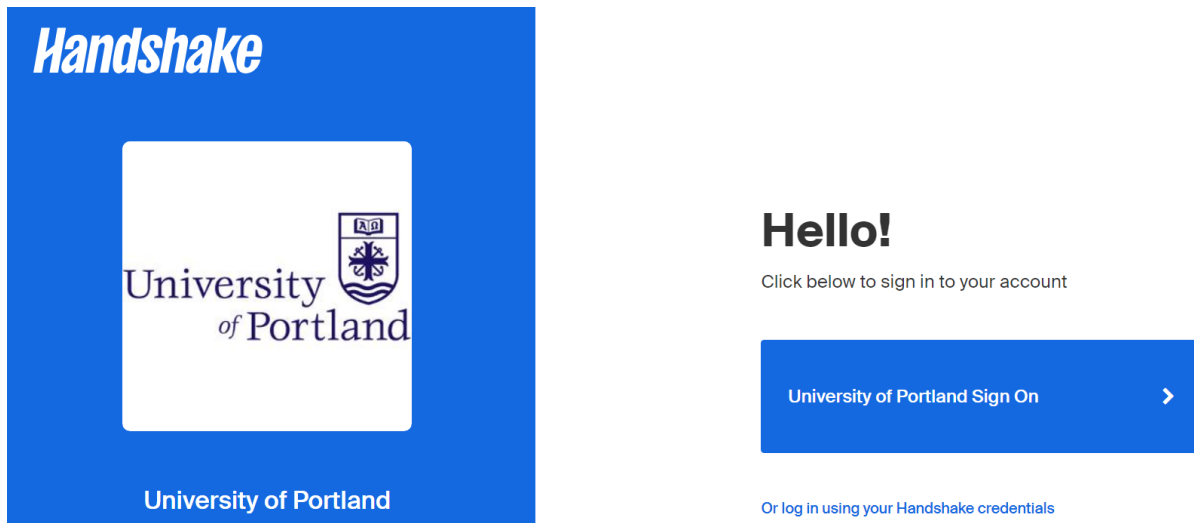


## How to Submit an Internship Learning Agreement in Handshake

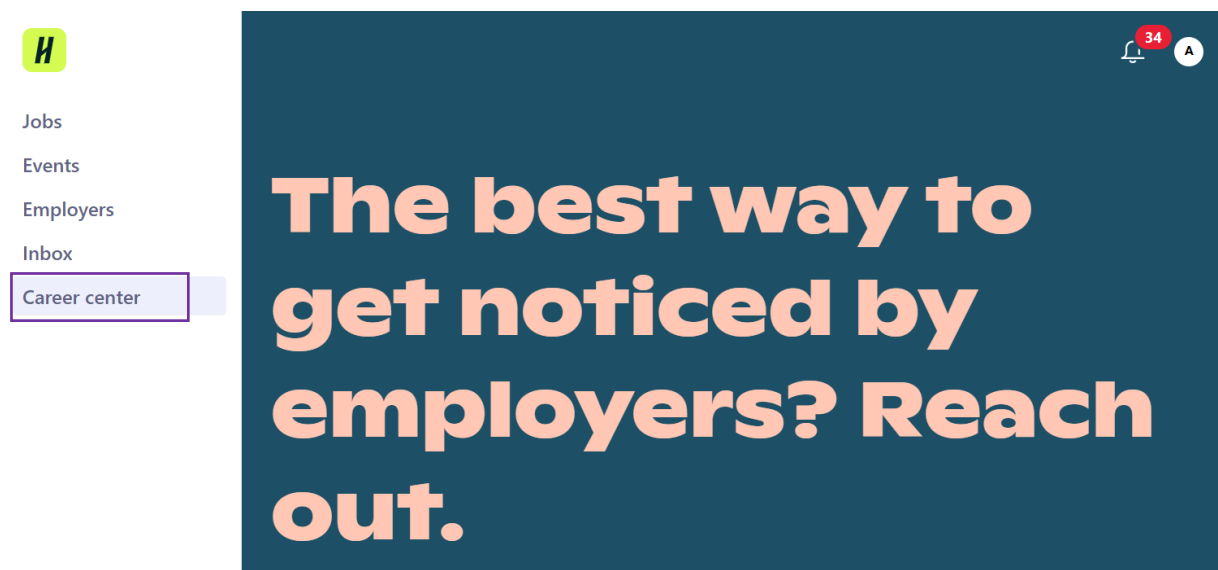
All students participating in an internship for academic credit at the University of Portland must complete an Internship Learning Agreement. You will complete this through your Handshake account via the “Submit an Experience” form. Below is a step-by-step guide for how to find and submit the form.

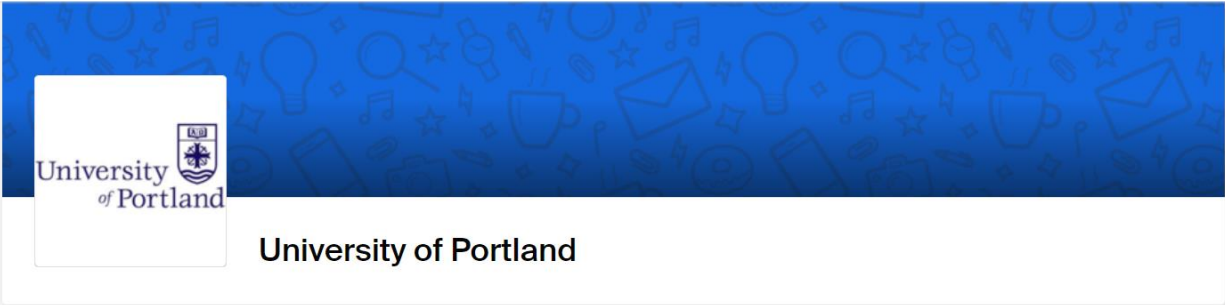
1. **Log into Handshake** here: <https://up.joinhandshake.com/>



- All University of Portland students have a Handshake account and can log in with Single Sign On. If you have not accessed your account before, you will need to activate your profile first.

2. Click on **'Career Center'** > then > **'Experiences'** > then > **'Submit an Experience'**





**Appointments** →  
Schedule time to meet with experts and build your career

**Experiences** →  
Track your internship or co-op experiences

**Surveys** →  
Answer questions from your career center

Experiences **Submit an Experience**

ORGANIZATION Test	EXPERIENCE TITLE Intern	<b>Pending</b>
SUPERVISOR / HR CONTACT Not Specified	EXPERIENCE TYPE	
<a href="#">View Details</a>		

3. Fill out the **Required Sections:**

Details

\* Experience template  
College of Arts & Sciences -- Internship Learning Agreement

\* Term  
Select a term

- **Experience template:** You should only see the template relevant to you, but if you have majors in multiple schools select the one you are doing the internship in.
- **Term:** Select the term in which you will be completing the internship.

## Organization

**\* Organization**

Test x ▾

Organizations may be an employer, institution, or program.

**\* Location**

123 Test Road, York, Pennsylvania 17404, United States

**Industry**

Internet & Software x ▾

- **Organization:** If you do not see your clinic in the drop-down menu, you will need to type the name in.
- **Location:** We want to know where the organization is located, even if you are interning remotely.



## Experience

**\* Experience**

Marketing Intern x ▾

Experiences may be specific jobs, internships, or other learning opportunities.

**\* Date**

2023-09-04  > 2023-12-22 

**Salary**

\$ 20

**Pay period**

hourly  
 monthly  
 yearly

Add experience to profile?

- **Experience:** Type in your title or a descriptor of your role if you do not have a formal title.
- **Date:** Put in your start and end date for the internship. If you do not know, confirm this with your site supervisor.

## Reviewer contact information

Faculty Supervisor (who is giving you credit for this internship)

**\* Email Address**

- **Email:** The faculty supervisor is the professor teaching your course, and we need their email so they can review and approve of your Internship Learning Agreement.

## Reviewer contact information

**Internship Site Supervisor**

\* **Email Address**

An approver with this email address does not exist. Please fill out the following fields to create one.

\* **Name**

**Title**

**Phone Number**

- **Internship Site Supervisor:** This is the person who will be supervising you at your internship site, and it is important we can reach them to approve your internship and for the final evaluation (both required for credit).

## Experience Details

Experience Type, Learning Goals, & Job Description

\* Is this internship paid or unpaid?

- Paid  
 Unpaid

\* How will you be completing this internship?

- Remotely  
 In Person  
 Hybrid

\* **Learning Goals:** List four learning goals to be completed during the internship in the box below. Please number these goals appropriately and include any specific action plans, measurement assessment, or time-frame deadlines to better help you in completing these objectives.

- **Pay and Working Type:** Select if the internship is paid or unpaid and if you will be in person, remote, or hybrid.
- **Learning Goals:** Please list four learning goals to be completed during the internship. **\*NOTE:** You will need these learning goals when you complete your internship evaluation at the end

of your internship. Please reflect on these throughout your internship experience and communicate them to your supervisor.

\* Internship Job Description: Copy and paste the internship job description, including requirements, qualifications and pertinent details in the box below.

Next Page

- **Job Description:** Please cut and paste the internship job description. If you have NOT been given a job description, work with your supervisor to come up with a 1-2 sentence position summary and 4-6 tasks at minimum; then enter that information here.

4. Click 'Next Page' > be sure to **carefully read** the terms > click 'Submit an Experience'

#### Title IX, For Credit Disclosure, Student Agreement

\* I am aware that Title IX of the Educational Amendments of 1972 states that students have the right to an education free from sex or gender related discrimination, harassment, or violence. Title IX protects students from sex or gender related discrimination, harassment, or violence that occurs in educational programs or activities. Since an internship is considered an educational activity, I understand that my Title IX rights apply to this internship. Concerns related sex or gender related discrimination, harassment, or violence at my internship or other education program or activity can be reported to the University of Portland Title IX Coordinator in person, by mail, by telephone, by electronic mail, or by electronic portal. Contact information for the Title IX Coordinator, the ability to submit a report, and information about resources are available at [www.up.edu/titleix](http://www.up.edu/titleix). Any concerns related to my internship can also be shared with my faculty supervisor, internship coordinator, or internship site supervisor.

I understand

\* It is the responsibility of the student to ensure all forms are completed in order to successfully complete an internship for credit. I understand I will need to fill out a variable credit form and have it signed by my Faculty Supervisor, if I am not already enrolled in an internship course. I understand I will be paying tuition for academic credit associated with this experience. I understand that I will need to fill out a final evaluation for my internship experience. This Internship Learning Agreement may be terminated by the mutual agreement of the student intern, site supervisor/employer, and/or faculty supervisor. Please contact the Internship & Experiential Learning Coordinator in the Career Center at 503.943.7201 or [internship@up.edu](mailto:internship@up.edu) if there are any questions or concerns.

I understand

\* I agree to all components of this University of Portland Internship Learning Agreement, and agree to carry out the objectives, strategies and methods of the agreement promptly and to the best of my ability.

I agree

[Go Back](#)

\* Indicates required field

Submit an experience

This form will send an automatic email to your faculty supervisor. When your faculty supervisor approves of your internship, another email will be sent to your site supervisor for them to review and approve your experience. **Please tell your site supervisor** to be expecting an email coming directly from Handshake, with the subject line, "An Experience Needs Your Approval." You can log into Handshake at any time to track the progress of your internship.

Still have questions? Contact the Internship and Experiential Coordinator at [internship@up.edu](mailto:internship@up.edu).