



DEPARTMENT OF CIVIL &
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INDUSTRIAL EXPERIENCE CONTRACT

STUDENT NAME and UML ID # (printed VERY CLEARLY)

NAME _____

ID# _____

Student:

This contract is valid for only **one** semester or summer session. Every semester in which you work at an industrial experience placement requires a new contract. Required signatures really are **REQUIRED**. In order to participate in Industrial Experience at University of Massachusetts Lowell, I agree that I will:

1. Gain approval from my faculty Industrial Experience advisor before signing up for Industrial Experience. He/she will evaluate my readiness for this program.
2. Provide my faculty Industrial Experience advisor with accurate and current employer contact information and descriptions of the jobs/projects I would like considered for my Industrial Experience participation. He/she will judge the technical & quality content of these Industrial Experience opportunities.
3. Review my financial aid, scholarship, student loans and health insurance to understand how this Industrial Experience may impact my funding and coverage.
4. Carefully read and understand the guidelines and requirements specific to my academic major for this experience. Usually this detailed information is available on the academic department's web site. Each student is ultimately responsible for making certain that he/she learns, understands and fulfills all the requirements for their department.
5. Maintain regular contact with my faculty Industrial Experience advisor and fulfill all the departmental academic requirements. Most Industrial Experience experiences will require submission of a complete report of activities and learning at the conclusion of each semester.
6. Facilitate the arrangements for a site visit by my faculty Industrial Experience advisor at my work place, if a visit is requested or required. This may include coordinating a meeting with my work supervisor and faculty Industrial Experience advisor.
7. Behave, speak, appear and act in an appropriate, professional manner at all times in my Industrial Experience environment and with my Industrial Experience colleagues. As a UMass Lowell student, working under the guidance of UMass Lowell faculty, you are a representative of this institution and all that you do reflects on UMass Lowell.
8. Complete and return the evaluation forms that I receive from Career Services and/or from my faculty advisor.
9. When complete, return this signed contract, with a copy of the approved job description and a thoroughly completed contact information/data sheet to the Civil and Environmental Engineering Office.

PLEASE NOTE: Undergraduate students who seek academic recognition on their transcript **MUST** officially register for the Industrial Experience course (industrial experience) using their academic department's appropriate Industrial Experience, internship, practicum or industrial experience course number. The faculty advisor for this experience must **PRE-APPROVE** this program for the student and provide the permission number that will allow SIS registration. All Graduate level Industrial Experiences carry zero (0) credits.

I have read, understand, agree to and accept all the elements of this contract.

Student Signature

Date

International Student studying at UMass Lowell on an F-1 visa:

Because the U.S. Citizenship and Immigration Services office (USCIS) has certain rules that I must follow, I agree to:

1. Obtain information relating to Curricular Practical Training (CPT) from the International Students & Scholars Office.
2. Bring this contract, **AFTER** it has been reviewed and signed by me, by my employer and by my faculty Industrial Experience advisor to the International Student Advisor **BEFORE** I begin my Industrial Experience assignment. This step is necessary so that the International Student Advisor may authorize my Form I-20 for CPT.
3. Read and sign Page 5 of this contract to confirm my understanding of the CPT regulatory requirements in order to maintain my valid F-1 status. CPT will not be authorized without my signature on Page 5 of this contract.

I have read, understand, agree to and accept all the elements of this contract.

Student Signature

Date

University of Massachusetts Lowell
**Industrial Experience Contract
& Signatures Continued**

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STUDENT NAME and UML ID # (printed VERY CLEARLY)

NAME _____

ID# _____

Cooperating Employer:

This student has been offered a position (please attach position description).

As a participant in the University of Massachusetts Lowell's Industrial Experience Program I agree to:

1. Provide relevant learning experiences, through work assignments, to this student.
2. Provide appropriate orientation, work place supervision and a safe environment for this student.
3. Accommodate at least one faculty site visit each Industrial Experience term if requested or required.
4. Provide a timely written evaluation of the student to the faculty Industrial Experience advisor (convenient, optional forms will be provided by the University).
5. Be responsible to meet all U.S. export laws and regulations

I have read, understand, agree to and accept all the elements of this contract.

Employer/Supervisor Name and Title Printed Clearly

Company/Organization Name Printed Clearly

Employer/Supervisor Signature

Date

Faculty Advisor:

The above mentioned student has my permission, subject to review by the International Student Advisor for F-1 visa holders, to proceed with official registration into University of Massachusetts Lowell's Industrial Experience Program in the _____ department because:

1. I reviewed the description of the Industrial Experience opportunity provided by this student and his/her prospective Industrial Experience employer.
2. I agree that, as described, this position:
 - has relevance to this student's academic program,
 - contains appropriate and sufficient technical content and learning opportunities for inclusion in the University's Industrial Experience Program.
3. I have verified that the student is in good academic standing. I believe he/she is prepared to undertake this Industrial Experience position.

Faculty Industrial Experience Advisor Name (Please Print VERY CLEARLY)

Student's Current GPA

Faculty Industrial Experience Advisor Signature

Date

Department Chair Signature (required in Computer Science)

Date

International Student Advisor:

I have met with the above named student and have ___ have not ___ authorized curricular practical training.

International Student Advisor Signature

Date

***Industrial Experience Data Sheet and Position Description forms
MUST be completed and attached to this complete contract.*** Revised 10/16