

UTS FIELD EDUCATION SUPERVISOR AGREEMENT

I _____ do agree to serve as a supervisor
TITLE FIRST NAME LAST NAME

for the following student: _____
FIRST NAME LAST NAME

who is going to be working as an intern from _____ until _____ for a total of _____ hours
MONTH/DAY MONTH/DAY

At: _____
ORGANIZATION NAME

ADDRESS

CITY STATE/PROVINCE COUNTRY

As part of this agreement, I will:

- a) Work with the student to complete/revise the Field Education Learning Contract;
- b) Faithfully read through the Supervisor's Manual for the Internship Program;
- c) Devote one hour per week for a full time internship (40 hours/week), or one hour every two weeks for a part time internship (20 hours/week) for a face-to-face Individual Supervisory Meeting with the Intern.
- d) Be available and accessible at the Field Education Site on a regular basis to provide consistent mentoring and training in ministry and leadership for the intern for the duration of their internship;
- e) Report to the Director of Field Education on a timely and consistent manner as defined in the Supervisor's Manual;
- f) Provide a good variety of opportunities in Ministry and Leadership for the intern so that he/she will be able to develop ministerial competency.

SUPERVISOR'S SIGNATURE DATE

Office _____ Cell _____ Email _____

Received By:

FIELD EDUCATION DIRECTOR'S SIGNATURE DATE