

## WORK INTEGRATED LEARNING (WINL 300) PART A: COURSE AGREEMENT

**Faculty of Arts and Science** 

#### Instructions for Completing and Submitting the WINL 300 Course Agreement. Please read carefully.

- 1. This form is a contract between the student, their faculty supervisor, and the organization contact/supervisor. This form contains two parts: Part A, the course agreement and Part B, the One-Time Placement Agreement. Part A is completed in consultation with the faculty supervisor and Part B requires a signature from the organization.
- 2. Students must complete Parts A and B and save a copy of the form to their computer.
- 3. Part A requires three digital signatures. For instructions on how to create a digital signature, see Appendix A.
  - a. Student: The student signs Part A and then emails it to the Faculty Supervisor.
  - b. **Faculty Supervisor:** The faculty supervisor will digitally sign Part A and email it to the Department Chair. Once the form is signed by the faculty supervisor, it cannot be changed by the Chair.
  - d. **Department Chair:** The Chair is the final signature to Part A. Once signed, the Chair submits Part A to <u>ASIndependentStudy@macewan.ca</u>.
- 4. A notification will be sent to the students mymacewan email account once they have been enrolled in the course.
- 5. Students will submit Part B to the Organization Contact/Supervisor along with a copy of Part A.

#### **Note concerning Independent Course Work**

Students can use a maximum of 15 credits of independent course work towards their degree. This includes all courses that are 398 and 498 as well as WINL 300, COSL 300, CMPT 496, SOCI 496, and SOCI 497. This does not include an Honours Thesis.

Student Name:	Student ID:
Discipline:	Enrolment Term and Year:
Placement Start Date:	Placement End Date:
Course Topic:	
[Course topic should be filled in as it will appear on th	ne student's transcript, using a maximum of 65 characters, including spaces]
Faculty Supervisor:	Faculty Supervisor Email:
Organization:	
Organization Contact/Supervisor:	Contact Phone Number:
Contact Address:	Contact Email:

ree to four sentences, describe your proposed project.
g Outcomes
r learning outcomes for this academic project (i.e. indicate what you hope to achieve).
rearring outcomes for this academic project (i.e. maicate what you hope to defice to).
t Background
courses that are relevant to the proposed research that are in progress or that you have completed.
, ,

#### **Guidelines for Evaluation**

With the assistance of the faculty supervisor and the organization contact, prepare a proposal with clear learning objectives for:

Course evaluation and feedback must include assignment values, due dates, any other feedback strategies, and the

- The work experience 10-20%
- Assessment from the faculty supervisor and organization contact of the work achieved 30-40%
- Reflection on the work using one or more of the following forms 10-20%
  - o Short essays
  - o Journal entries
  - o Blogs
  - o Online discussion
  - o Public presentation
- Final assignment submitted upon completion constitutes 30-40%

	Course Inf	formation	. Evaluation.	, and Feedback
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requency with which the student, project supervisor, and/or organization contact will meet. The student must receiv some feedback prior to the term's withdrawal deadline. Please see the Guidelines for Evaluation (below) for more nformation.				

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This document can be completed with an electronic signature. If you do not have an electronic signature you will nee
to create one. Instructions on how to create a digital signature start on page 6.

Student Signature:	Date:	_
Faculty Supervisor Signature:	Date:	_
Department Chair Signature:	Date:	



# WORK INTEGRATED LEARNING (WINL 300) PART B: ONE-TIME PLACEMENT AGREEMENT

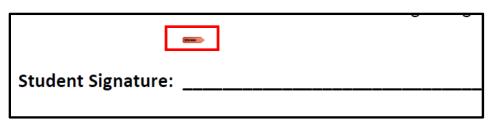
Faculty of Arts and Science

Section	on 1: To be completed by the student	
Date:		
Host (	Organization:	(the "Host Organization")
Prima	ary Contact:	
Re:	Work Integrated Learning Agreement be ("MacEwan University") and the Host Or	etween the Board of Governors of Grant MacEwan University rganization
Stude	ent Information:	
Studen	nt Name:	Program:
MacEv	wan University Supervisor:	Course Name and Number: WINL 300
Place	ment Information:	
Organi	ization Contact:	Placement Start Date:
	ct Title:	
Addres	ss:	Postal Code:
Phone	Number:	Email:
Please	refer to Part A for the <b>Applicable Course Lear</b>	ning Outcomes and Supervision and Evaluation Requirements.
Section	on 2: To be completed by the Host Organization a	nd Representative from Grant MacEwan University.
	• •	ited Learning placement in accordance with the following:
Learni Studer placem	ng placement, to MacEwan University in advance nt is required to abide by all MacEwan University	or procedures which apply to the Student as part of the Work Integrated so MacEwan University can properly advise the Student. At all times, the policies with respect to the Work Integrated Learning placement. During the University, regardless of whether he or she is an employee of the Host
the Stu	udent has acted in a way that compromises the saf	ys' written notice to the other party. If the Host Organization determines that ety or security of its staff, patients or members of the public, this Agreement e reasons for termination) to MacEwan University. MacEwan University nent at any given time without notice.
respon attend	asible for any negligent acts or omissions by its eming placements within Alberta are covered by the	s or omissions by its students or instructors; the Host Organization is ployees, contractors, or representatives. MacEwan University students Workers Compensation Act. All information provided by one party to the other Information and Protection of Privacy Act (Alberta).
the Ap		d Learning placement is a learning opportunity for the Student and will support In addition, the Host Organization agrees to provide the Supervision and
This A	greement is effective as of the date specified above	e, and is executed by persons duly authorized to enter into such agreements.
	BOARD OF GOVERNORS OF GRANT EWAN UNIVERSITY	HOST ORGANIZATION
Name	»:	PLEASE SIGN Name:
Title:		Title:

#### **How to Create a Digital Signature**

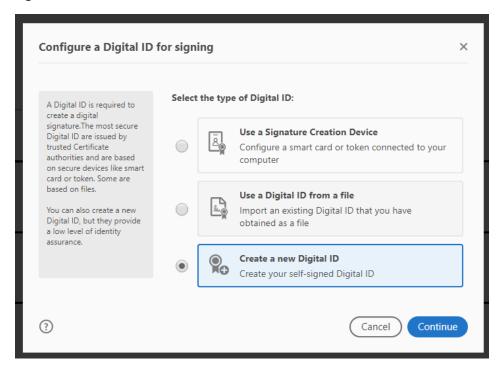
A digital signature is easy to create, and it can be saved to your computer for future signature requirements in Adobe Acrobat. Documents that require a digital signature will have a little red tab by the signature line (see the red box in Figure 1). Click on the red tab to start the process of creating a digital signature.

Figure 1



Once you click on the red tab, the following box will appear (Figure 2). Select "Create a new Digital ID" if you do not already have one. If you have previously created a signature, select "Use a Digital ID from a file".

Figure 2



Once you select "Create a new Digital ID," you will be asked if you wish to save the ID to your computer (Figure 3) and then to provide a bit of personal information (name, organizational unit, and email address) outlined in Figure 4.

Figure 3

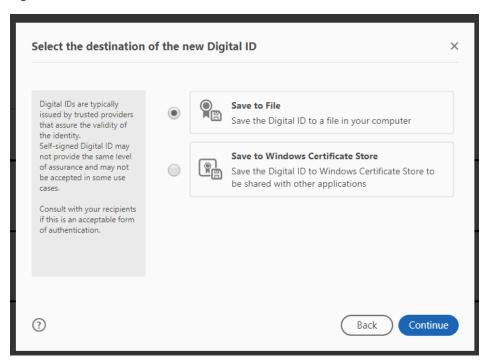
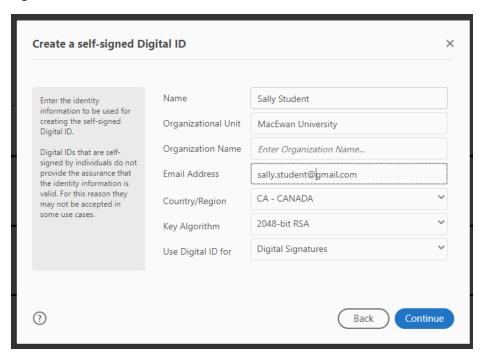


Figure 4



Once you fill in your personal information, select continue and then provide a password (Figure 5). Click the Save button. Please keep this password for future use.

Figure 5

Save the self-signed Di	igital ID to a file ×
Add a password to protect the private key of the Digital ID. You will need this password again to use the Digital ID for signing. Save the Digital ID file in a known location so that you can copy or backup it.	Your Digital ID will be saved at the following location :  C:\Users\beken\AppData\Roaming\Microsoft\Windows  Browse  Apply a password to protect the Digital ID:  Confirm the password:
3	Back Save

Now your digital signature (or ID) is ready to be added to your PDF. Select your signature (Figure 6) and enter your password in the red box at the bottom (Figure 7).

Figure 6

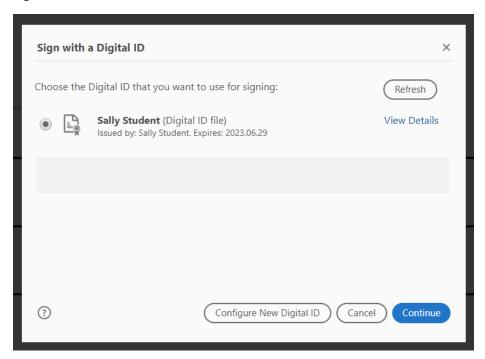
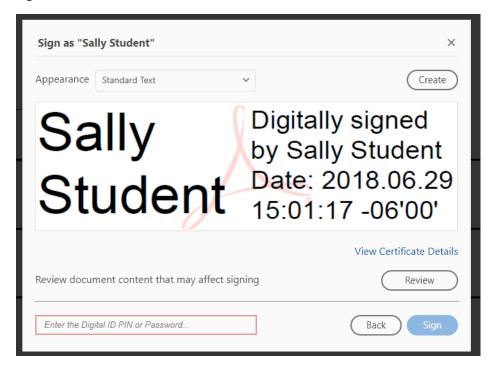
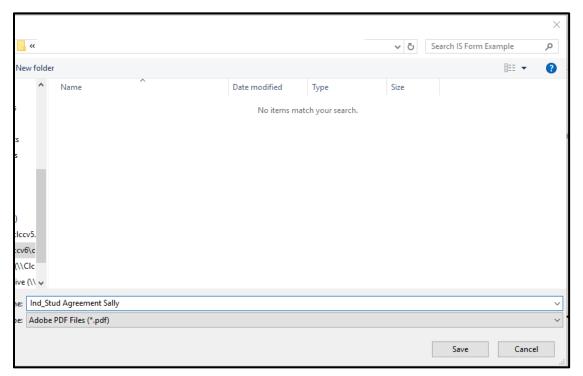


Figure 7



You will then be asked to save your document to your computer (Figure 8).

Figure 8



Your digital signature will appear as in Figure 9.

### Figure 9

Signatures		
Student Signature: Sally Student Digitally signed by Sally Student Date: 2018.06.29 15:03:42 -06'00'		
Project Supervisor Signature:		
max .		
Department Chair Signature:		

Once your document has been signed, it is ready for submission. All you need to do is attach it to an email.