Section A **INTERNSHIP CHECKLIST**

This checklist is provided to help you through the planning and completion phases of the internship. Please make sure you **have discussed your internship experience with your advisor or internship coordinator**.

BEFORE YOU BEGIN THE INTERNSHIP

- Decide on the type of internship experience desired. (For example: Cardiac Rehab, Corporate Fitness, Wellness.)
  - Do NOT choose a rehabilitation facility. Working with a rehabilitation specialist (PT, PTA) under Physical Therapgy professional guideline may violate the Exercise Science scope of practice and jeopardizes your UE professional liability coverage.
- Select a site for the internship.
- Call/contact the internship site as early as possible to determine availability of internships and to schedule an appointment for an interview, if required.
- **Register for EXSS 488 and select the correct section**. The section number corresponds to your UE internship advisor. (Please discuss the credit number, course number and section number with your advisor or internship coordinator prior to registration).
- Read and fully understand the Internship Policies and Procedures (See. B).
- On the Internship Agreement Form (See C), obtain the necessary signatures, your own, the on-site supervisor plus the UE internship coordinator.
- Return one copy of the Internship Agreement Form to your UE internship coordinator and keep one copy for your records.
- Supply the internship site with any needed material required by the site (health records, applications, immunizations, background check).
- Have you ever been convicted of a felony? □ Yes □ No

DURING YOUR INTERNSHIP

- Keep a daily log of your activities. (Be sure you have discussed this with you advisor or internship coordinator)
- Make sure you provide the on-site supervisor with the **MID-TERM Internship Evaluation Form (**Section D). Return this form to the UE internship coordinator.
- Make sure you provide the on-site supervisor with the **FINAL Internship Evaluation Form** (Section E). Return this form to the UE internship coordinator.

UPON COMPLETION OF YOUR INTERNSHIP

- Turn in your daily log.
- Turn in your written summary of the internship experience along with a reflection of your experience. Each a minimum two pages.
- Discuss the internship with your advisor (You may be asked to provide a presentation of your internship experience to a group).
- **Sign and return the checklist upon completion of internship.**

  Signature – UE Student Intern_____

Section B

EXSS INTERNSHIP POLICIES AND PROCEDURES

I Introduction

All of the tracks within the Exercise Science major are required to successfully complete an internship experience (EXSS 488). (For specific major requirements regarding internship, please see the University of Evansville catalog and/or speak to your advisor.) Depending on the specific track, students with a major in Exercise Science are required to complete 6-12 credit hours of EXSS 488 internship credit. Individual internships may be completed in a variety of areas which might include sports conditioning, wellness, cardiac rehabilitation, corporate fitness, managed care facilities and many others.

II Departmental Policies and Procedures

Internships are academic experiences designed to provide the students with practical exposure in a field or fields related to their academic majors. Interns may work in a variety of settings and are supervised by external on-site personnel and a UE faculty coordinator. Each internship experience carries academic credit dependent upon the number of hours on site.

A. Policies

1. EXSS 488 is open to Exercise Science majors and minors.

2. A student must be classified as a (preferably) ***junior or senior*** in order to register for and participate in an approved internship experience. Sophomores may enroll in an internship experience with consent of the academic advisor.

3. All interns who are Exercise Science majors must be CPR certified to perform an internship. Administration track Exercise Science majors, please check with your advisor regarding CPR status (CPR status varies with specific sites).

4. All students registered for an internship will receive a letter grade for their performance based on the evaluation of the on-site supervisor in conjunction with the UE faculty coordinator.

5. **All students registering for an internship must first complete the Internship Agreement form (see Sec. C). <u>The agreement form must be fully completed prior to the start of the internship. Keep one copy and provide a second copy to the School of Health Sciences office (Graves Hall 219) for archival records.</u>**

B. Registration Policies:

1. One credit hour will equal the successful completion of 45 on-site work hours (i.e., 3 academic credit hours will equal 135 on site hours).

2. All internships ***must*** be completed in the same semester in which the student registers for EXSS 488.

3. Prior to the semester in which the internship will be experienced, the student must meet with her/his faculty advisor to discuss appropriate internship possibilities.

4. **It is the responsibility <u>of the student</u> to select and arrange the internship experience.**

5. The students must complete the Internship Agreement form (Section C) prior to the start of the internship experience. It is the responsibility of the student to return the forms upon completion of the internship.

C. Professional Conduct:

1. Students are representing the University of Evansville, and the School of Health Sciences. As such, students are expected to present themselves in a ***professional*** manner during the internship experience.

2. Students will observe all policies and procedures of the on-site internship provider.

3. The student, UE faculty coordinator or on-site supervisor may request removal of the student from the internship experience.

D. Assignment Responsibilities:

1. It will be the responsibility of the student to arrange regularly scheduled consultations (either in person, phone or email) with their UE faculty coordinator during the course of the internship.

2. Students are responsible for transportation to and from the internship site.

3. Students are expected to keep a written evaluation of their experiences. This will include the date, day, time on-site plus the total number of hours for that session. For example: March 3, 8:00-11:00 a.m. (3 hrs). They shall also provide for each experience a summary of responsibilities/duties.

4. A summary of the student's internship, along with the daily log will be turned in at the end of the semester to the UE faculty coordinator. The summary should include a self reflection component as well as a review of the internship experience.

5. Should any problems or difficulties occur during the course of the internship, the student should consult the UE faculty coordinator concerning a proper course of action.

E. Grading/Evaluation

1. The immediate on-site supervisor for the student's internship will be responsible for evaluating the performance of the student relating to her/his internship responsibilities. The on-site supervisor will base performance on student attitude- application to task(s), initiative, dependability, maturity and poise, judgment and overall performance (section D).

2. In addition to the grade recommendation made by the on-site supervisor, the UE faculty coordinator will objectively evaluate the student's written daily log and summary of internship experience. An oral presentation of the student's internship experiences to the EXSS faculty and interested EXSS students may also be required (Please check with your UE internship advisor).

F. Health Requirements

Many facilities require some specific health information to insure safety of both clients/patients and students. The student should check with the internship facility to determine what, if any, health information they require. The student should be prepared to supply the following (health) information.

1. Proof of immunization for: german measles (rubella), measles (rubeola), mumps, chicken pox (varicella) and poliomyelitis.

2. Provide proof of a negative TB skin test or chest X-ray.

3. Demonstrate immunization against Hepatitis B.

4. Demonstrate proof of Cardiopulmonary Resuscitation (CPR).

5. Background check.

Section C

EXSS INTERNSHIP AGREEMENT
SCHOOL OF HEALTH SCIENCES

Name _____
Major _____
Semester of internship _____

This is to certify that _____, will be completing course requirements for EXSS 488 – Section _____ (fill in section number) for _____semester credit hours x 45 = _____on site hours.

Student Information

Student's Address: _____ Phone: _____

_____ E-mail: _____

_____

Internship Provider Information

Internship Provider: _____

Address: _____

_____

_____

On Site Internship Supervisor: _____

Title: _____

Phone: _____ _____

E-mail: _____

University of Evansville Internship Advisor or Coordinator Information

UE Internship Advisor: _____

Phone: _____ _____

E-mail: _____ _____

Expected Internship Experiences:

These experiences will be Graded on the Final Evaluation Form:

_____

_____

_____

_____

*Copy page for SHS office.

STUDENT RESPONSIBILITIES

Transportation to and from internship.
Conform to the policies and procedures of the on site organization.
Professional attitude and demeanor.
Engage in activities under the scope of practice of an Exercise Science professional

UNIVERSITY RESPONSIBILITIES

Provide a conference with the student and/or internship supervisor.
Provide the internship supervisor, if requested, with additional information and/or clarification of purpose of internship.

INTERNSHIP PROVIDER

Designate an on site supervisor for the student.
Involve the student with the activities sighted in the expected internship experience list.
Submit forms and other information concerning performance of the student.
Notify the University of any situation where the student is not performing to expectations.
Maintain a sufficient level of staff support to provide supervision of the student.

JOINT RESPONSIBILITIES

Removal of the student from the internship experience may be requested by either party. This agreement is subject to revision as deemed necessary by either party.

HOLD HARMLESS AGREEMENT

The student agrees to hold the University of Evansville and the Internship provider harmless for any liabilities associated with the internship at the same.

The Internship provider agrees to hold both the University of Evansville and the student harmless for any liabilities associated with the duration and completion of the internship at the same institution.

All parties then, release liability for any and all activities associated with the internship and agree hold harmless parties, associated and constituencies of the institutions named below.

UNIVERSITY OF EVANSVILLE **INTERNSHIP PROVIDER**

_____ _____

Signature - Student Date Signature - On Site Supervisor Date

_____ _____

Signature - UE Coordinator Date Title - On Site Supervisor

*Copy page for SHS Office

Section D

UNIVERSITY OF EVANSVILLE
MID-TERM INTERNSHP EVALUATION

Please evaluate the student intern at the Midpoint of her/his internship. Please return the evaluation to the UE internship coordinator via Email, mail or fax. Contact information below.

STUDENT INFORMATION

Student's Name: _____
UE internship advisor/coordinator: _____
Major: _____
Semester and Year (of internship): _____
Dates: _____to _____
Internship Credit Hours: _____

INTERNSHIP SITE INFORMATION

Supervisor's Name: _____Title: _____
Site Name: _____
Address: _____
Phone: _____
Email: _____
Fax: _____

Instructor: The on-site supervisor should evaluate the student objectively, comparing him/her with other students of comparable academic level, with other personnel assigned the same or similar positions or with individual standards. Remarks are particularly helpful and appreciated.

Please use the following scale for evaluation:

A = Outstanding B = Very Good C = Average D = Marginal F = Unsatisfactory

Comments:

_____

_____

_____

_____

_____

_____

_____

_____

Signature – On-Site Supervisor

Please Return Evaluation to:

Erin Obenchain, Internship Coordinator
University of Evansville
School of Health Sciences
1800 Lincoln Avenue
Evansville, IN 47722
Fax: 812-488-2087 Email: em48@evansville.edu

Section E

UNIVERSITY OF EVANSVILLE FINAL INTERNSHIP EVALUATION

STUDENT INFORMATION

Student's Name: _____

Major: _____ Course Number EXSS 488

Semester of Internship: _____Year _____

Dates of Internship: _____ to _____

Internship Credit Hours: _____

INTERNSHIP SITE INFORMATION

Supervisor Name: _____Title: _____

Site Name: _____

Address: _____

Phone: _____

Email: _____

Supervisor: The immediate supervisor should evaluate the student objectively, comparing him/her with other students of comparable academic level, with other personnel assigned the same or similar positions or with individual standards. Remarks are particularly helpful and appreciated.

I. Internship Experiences (Please transfer from Internship Agreement, section C)

	Experiences	**Grade**
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____

Experience-Related Comments:

_____

_____

_____

_____

II. Please evaluate the student for each item below.

Please use the following scale for evaluation:

5 = Excellent 4 = Good 3 = Average 2 = Below Average 1 = Poor NA = Not Applicable

Item For Evaluation	**Rating**					
Reliability (Promptness, punctuality, attendance)	5	4	3	2	1	NA
Appearance (appropriate to setting)	5	4	3	2	1	NA
Evidence of enthusiasm in work	5	4	3	2	1	NA
Ability to learn	5	4	3	2	1	NA
Demonstrates initiative	5	4	3	2	1	NA
Works well under supervision	5	4	3	2	1	NA
Works independently	5	4	3	2	1	NA
Communicates well with other staff and supervisor	5	4	3	2	1	NA
Maturity and Poise	5	4	3	2	1	NA
Response to supervision (Accepts and responds positively to constructive criticism)	5	4	3	2	1	NA
Judgment	5	4	3	2	1	NA
Demonstrates professional attitude	5	4	3	2	1	NA
Ability to problem solve	5	4	3	2	1	NA
Ability to relate and work with clients	5	4	3	2	1	NA
Proficient using tools and/or instruments	5	4	3	2	1	NA
Quality of work	5	4	3	2	1	NA

Overall Performance (Please Circle One)

A	B	C	D	F
Outstanding	Very Good	Average	Marginal	Unsatisfactory

THE STUDENT HAS COMPLETED ALL INTERNSHIP HOURS AS AGREED UPON IN SECTION C.

On-Site Supervisor Signature **Date**