**Internship Requirements**

1. Discuss potential internships with your Academic Advisor.
2. Verify with the department head of the Communication and Media Studies (CAMS) department if there is an Affiliation Agreement on file for the agency. **If none, proceed to step 3. If yes, proceed to step 4**.
3. Fill out **Form A or B - Affiliation Agreement Individual Student-Arranged Paid (Form A) or Unpaid (Form B) Work Experience\***
	1. Obtain appropriate form from the department head or the department secretary
	2. Once completed submit to the CAMS department head.
4. Fill out **Form #1 – Work Experience Learning Agreement\*** (pages 3-5)
5. Work with your supervising faculty member and the agency site supervisor to complete all three pages of this form.
6. Once completed, submit the form to the supervising faculty member who will be grading you in the internship.

Date Completed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Before work can be begin, complete **Form #2 – Individual Student-Arranged Work Experience Course Registration\*** (page 6)
	1. This form must be completed, signed off and submitted to the Registrar’s Office and a course sequence number created **before** work can begin – this is when you are officially considered enrolled in the internship and can start counting hours towards your desired internship credits.

Date Completed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Halfway through the internship have your on-site supervisor fill out **Form #3 –Site Supervisor’s Mid-Internship/Work Experience Evaluation of Student\*** (page 7)
	1. Once completed, submit the form to the supervising faculty member who will be grading you on the internship.

Date Completed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. At the end of the internship, have your on-site supervisor fill out **Form #4 –Site Supervisor’s Final/Work Experience Evaluation of Student\*** (page 8)
	1. Once completed, submit the form to the supervising faculty member who will be grading you on the internship

Date Completed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Complete the student’s self-evaluation: **Form #5 – Final Internship/Work Experience Student Evaluation\*** (pages 9-10)
	1. Submit it to the supervising faculty member **within one week** of the conclusion of your internship.

Date Completed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Within one week** of the conclusion of your internship, write a brief student reflection paper outlining what was accomplished during the internship and the extent that each of the learning objectives were met.

Date Completed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Northern Michigan University is committed to providing a learning, living and working environment free from discrimination. NMU supports the Title IX\* federal law that prohibits discrimination on the basis of sex, including: gender based discrimination, pregnancy and parenting discrimination, sexual harassment, sexual assault, stalking, dating violence, domestic violence, voyeurism, and any other conduct of a sexual nature that is nonconsensual.

Title IX covers any area where an NMU student is assigned for placement (e.g. student teaching) and/or participates in an internship arranged or initiated by the University, during their term at NMU.

The University cares about you.  If you believe you are experiencing or experienced sex discrimination, in a university or non-university sponsored placement and/or internship, please report.  The University has resources and support information available for you.

To report, please contact:

Complaints against employees, applicants, and third parties
Janet Koski
Director of Equal Opportunity
Equal Opportunity Officer and Title IX Coordinator
105 Cohodas Building
906-227-2420
jakoski@nmu.edu

Complaints against students
Mary Brundage
Associate Dean of Students
Deputy Title IX Coordinator
2001 Hedgcock
906-227-1705
mbrundag@nmu.edu

Emergency
Public Safety and Police Services
158 Services Building
906-227-2151

\* Title IX of the Education Amendments **Act** of 1972 is a federal law that states: "No person in the United States shall, on the basis of sex, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any education program or activity receiving Federal financial assistance."

**WORK EXPERIENCE LEARNING AGREEMENT (Form #1)**

**STUDENT INFORMATION**

|  |
| --- |
| First Name Last Name Major(s) [ ]  FR [ ]  SO [ ]  JR [ ]  SR [ ]  GradPhone NMU Email Address City State Zip Emergency Contact Name Relationship Phone  |

**AGENCY/ EMPLOYER INFORMATION**

|  |
| --- |
| Organization Name Organization Contact Name Site Supervisor Name Supervisor PhoneSupervisor Title Site Supervisor E-mailMailing Address City: State: Zip: Work Site Location (if different from mailing address):  |

**INTERNSHIP/WORK EXPERIENCE LEARNING INFORMATION**

|  |
| --- |
| Job Title: Semester: \_\_ Fall \_\_Winter \_\_Summer Year: Start Date (mm/dd/yyyy): End Date (mm/dd/yyyy): Hours per week: # credits: (If applicable) Pay rate/hour: $ or Stipend: $ Experience relates to the Upper Peninsula or region (within approx.200 miles): \_\_Yes \_\_No (for community engagement purposes) |

**INTERNSHIP/WORK EXPERIENCE LEARNING OUTCOMES**

|  |
| --- |
| **Learning Objectives**: What are the educational outcomes (e.g. academic knowledge and career skills) to be obtained during this experience?  |
| 1. **To adapt and apply knowledge and skills gained in the collegiate major in a workplace environment.**
2. **To gain experience managing multiple tasks and interpersonal relationships related to careers in a desired field of employment.**
3. **To obtain new perspectives and abilities in the process of managing tasks coordinated by the on-site supervisor for the internship.**
 |

|  |
| --- |
| **Job Description**: *Instructing faculty and/or student complete; please be clear and precise.* What are the planned responsibilities (e.g. tasks and activities) expected of the student and learning opportunities provided to the student that will help achieve the learning outcomes? This is unique per student experience. An agency/employer position description may be attached to supplement the answer below. |
|  |

|  |
| --- |
| **Assessment Criteria**: What are the required documents that provide a means of assessing a student’s academic performance? *All documents must be submitted before a grade is assigned for the internship experience.* |
| 1. **A brief site-supervisor’s progress report submitted half-way through the internship establishing that at least satisfactory progress is being made by the student in fulfilling responsibilities and meeting learning objectives.**
2. **A completed employer’s evaluation form indicating that the student has at least satisfied the responsibilities of the internship.**
3. **A completed student’s self-evaluation form.**
4. **A brief student reflection paper outlining what was accomplished during the internship and the extent which each of the learning objectives noted above were met.**
 |

**EXPECTED ROLES and RESPONSIBILITIES**

University and Agency roles and responsibilities are documented in the signed, ongoing Affiliation Agreement on file with the NMU Academic Affairs Office and/or the NMU Risk Manager.

Student Responsibilities

1. Work in an ethical, courteous, cooperative and otherwise professional manner;
2. Abide by all employer policies, rules, and regulations;
3. Perform all work assigned by the employer and/or director supervisor in a quality and timely manner;
4. Dress appropriately for all assignments and maintain a well-groomed appearance;
5. Complete assignments and maintain contact with the University work experience director/instructing faculty;
6. Pay the University for the credits taken;
7. Accept the decision(s) of the employer and/or the University, if it becomes necessary, due to unforeseen circumstances, to terminate the work experience prior to the expected end date.
8. Provided a signed Informed Consent form, if requested.

**Agreed:**

Student Signature Date

Instructing Faculty Member Name

Instructing Faculty Member Signature Date

Site Supervisor Name\*

Site Supervisor Signature\* Date

\*Preferred signature is the immediate site supervisor of the student, however, the agency/ employer may designate another signee responsible for student duties.

|  |
| --- |
| **Procedure**1. Complete Learning Agreement (Appendix D) or equivalent within the discipline.
2. Obtain required signatures.
3. Distribute copies to all signees.
4. Retain a copy, along with the Work Experience Course Registration form in Director files.
 |

 **Individual Student-Arranged Work Experience Course Registration (Form #2)**

|  |
| --- |
| Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Agency Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_ (last) (first) (M.I.)NMU IN: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_To be completed by the instructing faculty member:Work experience Course ID\*: \_\_\_\_\_\_\_\_\_\_ Department: Communication & Performance StudiesSemester: \_\_ Fall \_\_Winter \_\_Summer Year: \_\_\_\_\_\_\_\_Credit hours\*: \_\_\_ Minimum hours required to earn credits listed: \_\_\_\_\_\_\_\_\_\_\_\_Student will be: \_\_\_\_\_Paid \_\_\_\_\_Not PaidInstructing Faculty Information: \_\_\_\_\_on load \_\_\_\_for pay\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Student Advisor Signature Date Student Signature Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Department Head Signature Date Print name of Instructing Faculty\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Dean Signature (if required) Date NMU IN of Instructing FacultyI have read the *Academic Work Experiences Guidelines*, available in share.nmu.edu and Academic Affairs websites, and confirm that an Affiliation Agreement with this organization and Learning Agreement for this student’s work experience are on file with Academic Affairs.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Instructing Faculty Signature Date**Note: The completed form with necessary signatures must be submitted to the Registrar’s Office, 2202 Hedgcock, PRIOR to the start of the work experiences. Work experiences will NOT be added to the student’s record after the work has been completed.**Course CRN:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Procedure**1. Complete this form to create a section and enroll a student for an individually arranged work experience (internship, field experience, etc.)
2. Obtain required signatures.
3. Submit to Registrar’s Office before work begins (or at least before end of the semester)
4. Retain copy, along with the Learning Agreement (Types 2 and 3) or job description
5. (Type 4), in Director files.
 |

**Site Supervisor’s Mid-Internship/Work Experience Evaluation of Student (Form #3)**

Student’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Work Experience Dates: From \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ To \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Organization Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work Experience Location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

On-site Supervisor Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

On-site Supervisor Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*This form should be completed by the person in the best position to evaluate the student’s performance.*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | ExceedsExpectations | Meets Expectations | Needs Improvement | Unacceptable  | Not applicable |
| **Quality of Work**Thoroughly performs work that meets goals and deadlines with few, if any, errors. Follows instructions well; requires little supervision to ensure quality. | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |
| **Written Communication**Consistently submits clear, precise and grammatically correct documents**.** | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |
| **Oral Communication** Effectively presents ideas; speaks clearly and directly. Practices attentive and active listening with supervisors, peers and others. | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |
| **Problem Solving / Critical Thinking**Identifies problems and issues; develops viable alternatives / solutions. | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |
| **Information and Technical Literacy**Knows where to find information and resources and how to use them; able to effectively use technology to complete tasks without assistance. | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |
| **Ability to Learn**Seeks feedback and acts on it; learns from mistakes; expands working knowledge; takes advantage of available training opportunities. | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |
| **Team Work** Works cooperatively with and respects opinions of others and respects their opinions; builds consensus.  | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |
| **Leadership**Willing to assume leader role; adapts to situations; demonstrates organizational skills, tactfulness and calm; others respond favorably and with respect. | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |
| **Initiative** Self-learner; works well independently; asks appropriate questions; seeks challenges; asks for and able to handle more work.  | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |
| **Judgment**Demonstrates ability to make sound decisions, within boundaries, based on knowledge available. | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |
| **Work Habits** Manages times effectively; punctual; attendance is regular; dresses appropriately; adheres to policies. | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |
| **Personal Attitudes**Demonstrates persistence, integrity, and honesty; is dependable; accepts responsibility and criticism. | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |
| **Ability to Work in Field**Understands terms and concepts and how to apply them. Well-prepared to perform tasks of an entry-level position in this field. | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |
| **Overall Performance of Student** | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |

**General Comments and Recommendations (attach additional sheet, if needed)**:

**Site Supervisor’s Final Internship/Work Experience Evaluation of Student (Form #4)**

Student’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Work Experience Dates: From \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ To \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Organization Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work Experience Location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

On-site Supervisor Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

On-site Supervisor Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*This form should be completed by the person in the best position to evaluate the student’s performance.*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | ExceedsExpectations | Meets Expectations | Needs Improvement | Unacceptable  | Not applicable |
| **Quality of Work**Thoroughly performs work that meets goals and deadlines with few, if any, errors. Follows instructions well; requires little supervision to ensure quality. | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |
| **Written Communication**Consistently submits clear, precise and grammatically correct documents**.** | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |
| **Oral Communication** Effectively presents ideas; speaks clearly and directly. Practices attentive and active listening with supervisors, peers and others. | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |
| **Problem Solving / Critical Thinking**Identifies problems and issues; develops viable alternatives / solutions. | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |
| **Information and Technical Literacy**Knows where to find information and resources and how to use them; able to effectively use technology to complete tasks without assistance. | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |
| **Ability to Learn**Seeks feedback and acts on it; learns from mistakes; expands working knowledge; takes advantage of available training opportunities. | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |
| **Team Work** Works cooperatively with and respects opinions of others and respects their opinions; builds consensus.  | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |
| **Leadership**Willing to assume leader role; adapts to situations; demonstrates organizational skills, tactfulness and calm; others respond favorably and with respect. | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |
| **Initiative** Self-learner; works well independently; asks appropriate questions; seeks challenges; asks for and able to handle more work.  | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |
| **Judgment**Demonstrates ability to make sound decisions, within boundaries, based on knowledge available. | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |
| **Work Habits** Manages times effectively; punctual; attendance is regular; dresses appropriately; adheres to policies. | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |
| **Personal Attitudes**Demonstrates persistence, integrity, and honesty; is dependable; accepts responsibility and criticism. | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |
| **Ability to Work in Field**Understands terms and concepts and how to apply them. Well-prepared to perform tasks of an entry-level position in this field. | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |
| **Overall Performance of Student** | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |

**General Comments and Recommendations (attach additional sheet, if needed)**:

**Final Internship/Work Experience Student Evaluation (Form #5)**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Major: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Work Experience Dates - From \_\_\_\_\_\_\_\_\_\_\_ To \_\_\_\_\_\_\_\_\_\_\_\_ Credits: \_\_\_\_\_ Hours per week: \_\_\_\_\_

Organization Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work Experience Location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ On-site Supervisor Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What resources did you use to find your internship? (Check all that apply)

⃞ College or Department website ⃞ Faculty ⃞ Career Services Staff and/or website

⃞ Previous Employer ⃞ Family/Friend ⃞ General Internet Sites

⃞ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Strongly Agree | Agree | Neutral | Disagree  | Strongly Disagree | Not applicable |
| **ACADEMIC** |  |  |  |  |  |  |
| **Preparedness to assume duties**I understood terms and concepts in relation to my internship and major and were able to apply them. I felt well-prepared to perform the tasks of an entry-level position in this field. | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |
| **Level of Demands of Assigned Duties**I was provided levels of responsibility consistent with my ability and was given additional responsibility as my experience increased. | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |
| **Consistent with Learning Objectives**The objectives of the internship were clear and my tasks related to the outlined responsibilities. | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |
| **Relevance of this experience to Career Goals**This experience gave me a realistic preview of my field of interest.  | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |
| **Overall Rating of my *Academic* Work Experience**My internship was an excellent learning experience. | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |
| **WORK SITE** |  |  |  |  |  |  |
| **Direction and Assistance from Supervisor**I had regular meetings with my supervisor and received constructive, on-going feedback. | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |
| My supervisor was available and accessible when I had questions/concerns. | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |
| **Preparedness to assume duties**I was given adequate training. | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |
| The work I performed was challenging and stimulating. | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |
| **Acceptance of Function member of the Staff by Coworkers**I was treated on the same level as other employees and had a good working relationship with my coworkers. | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |
| **Addressed Risk and Safety Issues**Safety and risk issues were reviewed and addressed when needed. | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |
| **Ability to Work in Field**I feel that I am better prepared to enter the world of work after this experience. I have a better understanding of concepts, theories, and skills in my course of study. | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |
| **Internship Recommendation**Would you recommend this internship to other students? | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |
| **Overall Rating of *Work Site***This *work site* provided an effective, exceptional internship experience. | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |
| **Overall Internship Experience**Overall, my internship was valuable and a positive experience.  | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** | **🞆** |

**Please provide suggestions you may have for future interns who select this site (attach additional sheet, if needed)**:

**General Comments and Recommendations regarding internships (attach additional sheet, if needed)**:

**Were you offered a full-time, part-time or permanent position with the organization providing the internship?**

⃞ Yes ⃞ No

**What was your reason for completing an internship? (Check all that apply)**

⃞ Practical experience ⃞ Assistance in selection of career direction

⃞ Skills enhancement ⃞ Increased self-awareness/confidence

⃞ Professional contact/networking ⃞ Potential future employment with internship site

⃞ For college credit/fulfillment ⃞ Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Within one week of the conclusion of your internship, please return this student evaluation, along with your brief student reflection paper to either your CAMS advising faculty member or the CAMS Executive Secretary.