



Communication & Media Studies (CAMS)

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\***
  - a. Obtain appropriate form from the department head or the department secretary
  - b. Once completed submit to the CAMS department head.
4. Fill out **Form #1 – Work Experience Learning Agreement\*** (pages 3-5)
  - a. Work with your supervising faculty member and the agency site supervisor to complete all three pages of this form.
  - b. Once completed, submit the form to the supervising faculty member who will be grading you in the internship.

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

5. Before work can be begin, complete **Form #2 – Individual Student-Arranged Work Experience Course Registration\*** (page 6)
  - a. 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: \_\_\_\_\_

6. 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)
  - a. Once completed, submit the form to the supervising faculty member who will be grading you on the internship.

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

7. 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)
  - a. Once completed, submit the form to the supervising faculty member who will be grading you on the internship

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

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

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

9. **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: \_\_\_\_\_



## Communication & Media Studies (CAMS)

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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](mailto:jakoski@nmu.edu)

### Complaints against students

Mary Brundage  
Associate Dean of Students  
Deputy Title IX Coordinator  
2001 Hedgcock  
906-227-1705  
[mbrundag@nmu.edu](mailto: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	<input type="text"/>	Last Name	<input type="text"/>
Major(s)	<input type="text"/>	<input type="checkbox"/> FR	<input type="checkbox"/> SO <input type="checkbox"/> JR <input type="checkbox"/> SR <input type="checkbox"/> Grad
Phone	<input type="text"/>	NMU Email	<input type="text"/>
Address	<input type="text"/>		
City	<input type="text"/>	State	<input type="text"/>
Emergency Contact Name	<input type="text"/>		
Relationship	<input type="text"/>	Phone	<input type="text"/>

**AGENCY/ EMPLOYER INFORMATION**

Organization Name	<input type="text"/>		
Organization Contact Name	<input type="text"/>		
Site Supervisor Name	<input type="text"/>	Supervisor Phone	<input type="text"/>
Supervisor Title	<input type="text"/>	Supervisor E-mail	<input type="text"/>
Mailing Address	<input type="text"/>		
City:	<input type="text"/>	State:	<input type="text"/>
Zip:	<input type="text"/>		
Work Site Location (if different from mailing address):	<input type="text"/>		

**INTERNSHIP/WORK EXPERIENCE LEARNING INFORMATION**

Job Title:	<input type="text"/>		
Semester: __ Fall __ Winter __ Summer	Year:	<input type="text"/>	
Start Date (mm/dd/yyyy):	<input type="text"/>	End Date (mm/dd/yyyy):	<input type="text"/>
Hours per week:	<input type="text"/>	# credits:	<input type="text"/>
(If applicable) Pay rate/hour: \$	<input type="text"/>	or Stipend: \$	<input type="text"/>
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.



**Communication & Media Studies (CAMS)**

**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 Studies

Semester: \_\_\_ Fall \_\_\_ Winter \_\_\_ Summer Year: \_\_\_\_\_

Credit hours\*: \_\_\_ Minimum hours required to earn credits listed: \_\_\_\_\_

Student will be: \_\_\_ Paid \_\_\_ Not Paid

Instructing 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 Faculty

I 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.



Communication & Media Studies (CAMS)

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.

Table with 6 columns: Category, Exceeds Expectations, Meets Expectations, Needs Improvement, Unacceptable, Not applicable. Rows include Quality of Work, Written Communication, Oral Communication, Problem Solving / Critical Thinking, Information and Technical Literacy, Ability to Learn, Team Work, Leadership, Initiative, Judgment, Work Habits, Personal Attitudes, Ability to Work in Field, and Overall Performance of Student.

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



Communication & Media Studies (CAMS)

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.

Table with 6 columns: Category, Exceeds Expectations, Meets Expectations, Needs Improvement, Unacceptable, Not applicable. Rows include Quality of Work, Written Communication, Oral Communication, Problem Solving / Critical Thinking, Information and Technical Literacy, Ability to Learn, Team Work, Leadership, Initiative, Judgment, Work Habits, Personal Attitudes, Ability to Work in Field, and Overall Performance of Student.

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





Communication & Media Studies (CAMS)

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:

Table with 7 columns: Strongly Agree, Agree, Neutral, Disagree, Strongly Disagree, Not applicable. Rows include sections for Academic (Preparedness, Level of Demands, Consistent with Learning Objectives, Relevance to Career Goals, Overall Rating) and Work Site (Direction and Assistance, Preparedness, Acceptance of Function, Addressed Risk, Ability to Work, Internship Recommendation, Overall Rating).



**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

Skills enhancement

Professional contact/networking

For college credit/fulfillment

Assistance in selection of career direction

Increased self-awareness/confidence

Potential future employment with internship site

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.