Internship Packet Information and Forms

Please follow the directions on how to complete your portion of this packet based on the information under your header below. Thank you.

Student:

☐ Contact appropriate academic department to discuss internship placement and departmental requirements.
  ☐ Complete Internship Application and Acknowledgment Form (page 1) and return to academic department faculty/internship coordinator.
  ☐ Consult with academic department/internship coordinator regarding possible on-site interview or other departmental requirements to establish/set up internship.

☐ Submit resume to Career Services for review:
  ☐ Send resume as an attachment to careerservices@txwes.edu.
  ☐ Type “Internship Resume Submission” in the subject line of the email.

☐ Discuss/confirm internship location, employer contact information, and dates of internship period with academic department/internship coordinator.

☐ Obtain syllabus from academic department/internship coordinator and review syllabus with coordinator.

☐ Register for appropriate class with appropriate number of credit hours

☐ During the first week of the internship:
  ☐ Have internship site complete the Learning Guide/Project Outline (pages 2-3) and return to the Faculty Coordinator.
  ☐ Complete other academic department requirements to establish internship.

☐ Complete the Mid-Term Evaluation (page 5) form and return it to your faculty/internship coordinator.

☐ At the end of the semester, complete the Post-Work Evaluation Form (pages 6-8) and return to Career Services Center (second floor of the West Library, room 202 or 203).
Faculty:

☐ Advise student on departmental requirements to establish/set up internship and whether scheduling an interview at internship site is needed.

If the student is selected for an internship,

☐ Obtain a copy of the *Internship Application and Acknowledgement Form* (page 1) that is completed by the student.

☐ Obtain and review *Internship Site Request for Intern Placement* (pages 9-10) completed by the internship site.

☐ Advise Career Services Director of internship location, employer contact information, dates of internship period, student participating in internship, and faculty internship sponsor.

☐ Prepare syllabus and give to and review with student.

☐ Have student register for appropriate class with appropriate number of credit hours.
  ☐ Student should use “Internship Request” form available on the Registrar’s webpage: [http://www.txwes.edu/registrar/documents/InternshipRequest.pdf](http://www.txwes.edu/registrar/documents/InternshipRequest.pdf)

☐ Ensure that internship site completes the *Learning Guide/Project Outline* (pages 2-3) and returns it to you (required).

☐ Visit work site at least once during semester (recommended).

☐ Have student complete the *Mid-Term Evaluation* (page 5) form and return it to you (optional).

☐ Have student complete any additional academic requirements according to syllabus.

☐ By the end of the semester, ensure that the student completes the *Student Post-Work Evaluation Form* (pages 6-8) and returns it to Career Services (required).

☐ Have internship site complete *Site Evaluation of Intern Form* (pages 11-12) or similar document and return to you (optional).

Internship Site:

☐ Complete *Internship Site Request for Intern Placement Form* (pages 9-10).

☐ Complete *Learning Guide/Project Outline* (pages 2-3) and sign *Internship Contract Form* (page 4) that student also signs. Return these to the student.

☐ At the end of the semester, complete the *Site Evaluation of Intern Form* (pages 11-12) and return to faculty coordinator.
Texas Wesleyan University

Internship Application and Acknowledgment Form

Student Name ____________________________ Student Email ____________________________
Home Phone _____________________________ Major _______________________________

Where would you like to be placed? _________________________________________________
Which semester do you plan to participate? _________________________________________

Acknowledgment of Responsibilities

1. I acknowledge and understand my responsibilities as a student participating in the Internship program as outlined in the Student Bulletin for Internships.
2. I understand that it is my responsibility to meet the requirements as established by my academic department coordinator.
3. I will be responsible for completing all of my work assignments and obligations by their respective deadlines.
4. I understand that, upon completion of my experience, I will complete a Post Work Evaluation and return it promptly to Career Services.
5. I will adhere to all program regulations and requirements as a student enrolled at Texas Wesleyan University.
6. I will report to work on time and, in the event of illness or emergency, will notify my intern site supervisor(s) promptly.
7. I will report to my academic department coordinator at once, any situation which would be detrimental.
8. If, for any reason during this assignment, I am removed from my position, I will not apply for unemployment benefits. I understand that this program is an academic program, not an employment program.
9. My signature below indicates my understanding of and adherence to the above requirements.
10. No life credit for internship will be granted at Texas Wesleyan University.

In consideration for being allowed to participate in the internship program, I do hereby release and discharge all employees of Texas Wesleyan University from any and all liabilities, causes of action, costs, charges, claims, expenses, and demands, as well as from damages incurred by me as a result of my participation in the Internship Program.

By signing below, I hereby expressly assume any and all risks which may be incumbent with my internship.

Additionally, I hereby expressly agree forever to refrain from suit or proceeding at law against Texas Wesleyan University and Internship site for any personal injury or property damage incurred because of my participation in the Internship Program.

I have read, understood, and agreed to the terms herein.

_____________________________________________ ________________________
Student Signature      Date
LEARNING GUIDE/PROJECT OUTLINE

This internship agreement is only valid for ____________, year ________________
Internship course number ______________ Credits to be earned ____________

Student

Name: ___________________________________________ Major: _____________________________
Course title: __________________________ Faculty supervisor: ___________________________
Email address: ___________________________________ Major: _____________________________

Describe your learning goals during this internship: ____________________________________________
______________________________________________________________________________________
______________________________________________________________________________________
______________________________________________________________________________________

Internship Site

Internship site: ________________________________________________________________
Internship address: ________________________________________________________________
Street    city  state  zip
Internship site supervisor: __________________________________Supervisor’s title __________
Phone #: ______________________ Supervisor’s email address: ____________________________
Start date: ___________________ Completion date: _______________ Hours per week: __________
Internship location/department: _____________________ Student wages: __________________________
(Per hour/week/semester)

1. Duties and responsibilities of this work assignment (or attach job description):
______________________________________________________________________________________
______________________________________________________________________________________
______________________________________________________________________________________
______________________________________________________________________________________

Wesleyan Faculty Internship Coordinator

Faculty supervisor: __________________________________Department: ______________________
Phone #: ______________________ Email address: ___________________________________________
Indicate the following academic requirements that must be completed:
___ Completion of workbook ___ Term paper ___ Oral presentation ___ Maintain journal ___ Other (please describe) ____________________________
2. General objectives of this assignment (or attach description of internship objectives): 

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

3. Specific requirements of this student: 

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Signatures

Student Intern: I accept the responsibilities as stated on this agreement. I agree to complete all work assignments promptly and to the best of my ability. I agree to familiarize myself with and adhere to the relevant organizational policies, procedures, functions, and standards of ethical conduct.

Student Signature Date

Wesleyan Faculty/Internship Coordinator: I have discussed the internship and this Learning Agreement with the student. I agree to make myself available to talk with the student and/or supervisor about the internship experience, and to conduct an on-site visit and/or conference call with the student and supervisor.

Dept. Coordinator/Chair Date

Internship Site Supervisor: I have discussed the internship and this Learning Agreement with the student. I agree to provide the student with an orientation concerning the organizational policies, procedures, functions, and standards of ethical conduct as well as meet regularly with the student. I agree to conduct an evaluation of the student and to participate in a site visit and/or conference call with the student and Wesleyan’s Faculty/Internship Coordinator.

Internship Site Supervisor Date
Internship Contract

Internship Site: __________________________________________________________

In consideration for being allowed to participate in the internship program, I do hereby release and discharge all employees of Texas Wesleyan University from any and all liabilities, causes of action, costs, charges, claims, expenses, and demands, as well as from damages incurred by me as a result of my participation in the Internship Program.

By signing below, I hereby expressly assume any and all risks which may be incumbent with my internship.

Additionally, I hereby expressly agree forever to refrain from suit or proceeding at law against Texas Wesleyan University and Internship site for any personal injury or property damage incurred because of my participation in the Internship Program.

I have read, understood, and agreed to the terms herein.

_________________________________________________ __________________________
Student Signature      Date

_________________________________________________ __________________________
Coordinator of the Internship Program    Date
STUDENT MID-SEMESTER EVALUATION

Semester: _______________________________ Dates: _______________________________

Name: ________________________________ Major: _______________________________

Course: ____________ Credit Hours: ______ Faculty Coordinator: ____________________________

Internship Site: _____________________________________________

    Supervisor: ______________________________

    Phone #: ______________________________

************************************************************************************

1. Are your work responsibilities similar to those outlined on you Learning Guide? If not, please explain.

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

2. Is this experience contributing to your understanding of your major? How?

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

3. In general, what are your observations about this experience?

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

4. Any problems of which we need to be aware?

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

_______________________________________________________ ____________________________

Student        Date
STUDENT POST-WORK EVALUATION

Name: ____________________________________ Internship Site: _____________________________
(Please Print)                 Agency

Major: _________________________________ Course: ________________________________

Faculty advisor: ______________________________ Term: ________________________________

Course Coordinator

1. Indicate your overall impression of your intern site supervisor:
   
   Strengths: _______________________________________________________________________
   _____________________________________________________________________________________
   _____________________________________________________________________________________
   _____________________________________________________________________________________

   Weaknesses: _______________________________________________________________________
   _____________________________________________________________________________________
   _____________________________________________________________________________________
   _____________________________________________________________________________________

2. How has participation in this experience benefited you?

   _____________________________________________________________________________________
   _____________________________________________________________________________________
   _____________________________________________________________________________________
   _____________________________________________________________________________________

3. Please rate your experience by checking the appropriate box: As a result of this internship, my…

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>problem solving skills increased</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ability to creatively manage tasks increased</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>academic knowledge and skills increased</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>classroom learning was enhanced</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>appearance and attitude became more professional</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>networking skills increased</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>focus on career development increased</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
4. How could this experience be improved?
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

5. In your opinion, how well did your supervisor (co-workers) interact with you on the following scales?

<table>
<thead>
<tr>
<th></th>
<th>Poor</th>
<th>Marginal</th>
<th>Average</th>
<th>Good</th>
<th>Excellent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interpersonal relations</td>
<td>Not well</td>
<td></td>
<td></td>
<td></td>
<td>Very</td>
</tr>
<tr>
<td></td>
<td>accepted</td>
<td></td>
<td></td>
<td></td>
<td>cooperative</td>
</tr>
<tr>
<td>Adequate directions</td>
<td>Slow</td>
<td></td>
<td></td>
<td></td>
<td>Careful/complete</td>
</tr>
<tr>
<td>Variety of training opportunities</td>
<td>Very</td>
<td></td>
<td></td>
<td></td>
<td>varied</td>
</tr>
<tr>
<td></td>
<td>few</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Expected assignments vs.</td>
<td>Expectations</td>
<td></td>
<td></td>
<td></td>
<td>Assignments</td>
</tr>
<tr>
<td>actual assignments</td>
<td>were not met</td>
<td></td>
<td></td>
<td></td>
<td>were more than</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>my expectations</td>
</tr>
<tr>
<td>Amount of supervision</td>
<td>Little</td>
<td></td>
<td></td>
<td></td>
<td>Generally</td>
</tr>
<tr>
<td></td>
<td>contact</td>
<td></td>
<td></td>
<td></td>
<td>available</td>
</tr>
<tr>
<td>Overall satisfaction with experience</td>
<td>Unsatisfactory</td>
<td></td>
<td></td>
<td></td>
<td>Outstanding</td>
</tr>
</tbody>
</table>

6. Total Semester Earnings (if applicable): $ _____________

7. Following the internship were you offered continued employment?  ____yes  ____no
   If yes, did you accept?  _____yes  _____no

8. How did you find your internship?
   _____Faculty  _____Career Services  _____Self-initiated contact
   _____Friend/Relative  _____Interned with current employer  _____Other

9. Please list job responsibilities and tasks.  ___________________________________________________
   ___________________________________________________
   ___________________________________________________

10. Would you recommend this internship to another student? (Why or why not?)  ___________________
    ___________________________________________________
    ___________________________________________________

11. Regarding you supervisor, he or she served as a professional role model.  ____yes  ____no

12. Supervisor’s contact information:  Name: ___________________________________________
    Phone #: _________________________________________
    Email: ___________________________________________
13. Regarding your Wesleyan/faculty supervisor, please respond to the following

<table>
<thead>
<tr>
<th></th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Helpful in explaining internship process and requirements</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Available and easily accessible</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assisted in placement efforts</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Maintained professional demeanor</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Provided support during the internship</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

_______________________________________________________ ____________________________
Student Signature Date
DATE: ______________________________

COMPANY/AGENCY: ___________________________________________________

MAILING ADDRESS: ____________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

PHONE #: ______________________________________________________________

CONTACT NAME: ______________________________________________________

DEPARTMENT: _________________________________________________________

I. Proposed duties and responsibilities of student while on work assignment: 
(Attach additional sheet(s) if desired or attach a job description).
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

II. Learning objectives of work assignment:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
III. Academic or special skills required of student:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

IV. Wage or stipend available (if applicable): ____________________________

V. Number of hours required per week: ____________________________

VI. Preferred major/GPA of student: ____________________________

Please forward completed request by email, fax, or U.S. mail to:
Texas Wesleyan University
Career Services
1201 Wesleyan Street, Fort Worth, TX 76105
Fax/Phone (817) 531-4980
careerservices@txwes.edu
SITE EVALUATION OF INTERN

Semester: ____________________________ Dates: ____________________________

Name: _______________________________ Major: ____________________________

Course: ___________________ Credit Hours: _______ Coordinator: _________________

Internship Site: _____________________________________________

Supervisor: _______________________________ Phone #: __________________________

ACADEMIC EVALUATION: Please circle the appropriate response

The student was well-prepared for this experience:

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>NA</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If this student was available for hire and if you had an opening would you hire him/her? Yes ___ No ___

Briefly relate the student’s strong and/or weak work habits: __________________________

__________________________________________

__________________________________________

Would you make any recommendation that would help to prepare this student for his/her chosen career?

__________________________________________

__________________________________________
PERFORMANCE EVALUATION:
Please check appropriate responses.

<table>
<thead>
<tr>
<th></th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>NA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interested and industrious</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Learns work exceptionally well</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Works well with others</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Proceeds with little or no supervision</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Quantity of work exceptional</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Quality of work is excellent</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Attendance is exceptional</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Punctuality is exceptional</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Reliability is exceptional</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Professional image and appearance</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Courteous and responsive</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Ethical</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Self-confident and decisive</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Accepts advice and improves weaknesses</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

Please add any additional comments: ____________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________

____________________________  ___________
Student Signature             Date

____________________________  ___________
Supervisor Signature          Date

Please forward completed survey by email, fax, or U.S. mail to:
Texas Wesleyan University
Career Services
1201 Wesleyan Street, Fort Worth, TX 76105
Fax/Phone (817) 531-4980
careerservices@txwes.edu