LEISURE, SPORT, AND TOURISM STUDIES INTERNSHIP MANUAL

Do What You Love.

LSTS 4901, 4902, 4903, and 4904

Leisure, Sport, and Tourism Studies
Department of Health and Human Performance
Middle Tennessee State University
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Introduction

The internship is intended to be the culminating learning experience of the Leisure, Sport, and Tourism Studies major. It is intended to provide you with a wide range of experiences and the opportunity to apply the knowledge you have gained in the classroom into practice. When participating in an experience of this nature, it is important to remember that you are not only representing this Department and Middle Tennessee State University, but you are representing yourself as well. Your success in this experiential learning opportunity will depend upon the impression you create and your ability to perform your assigned duties.

Objectives

The internship has been designed to:

A. Provide the student with an opportunity for experiential learning.
B. Provide the student the opportunity to integrate theory and practice.
C. Provide the student an opportunity to broaden his/her understanding of the leisure services profession.
D. Enable the student to realize his/her own strengths and limitations.
E. Provide the student an opportunity to gain experience in leadership, supervisory and administrative functions with a LSTS organization.
F. Help the student gain an understanding and appreciation of the role, duties, and responsibilities of a full-time leisure services professional
G. Develop the student’s skills in various program areas; to increase his/her knowledge of the organization and administration of delivery in leisure, sport, or tourism areas.
H. Provide the student with experiences, which will enable him/her to develop and improve interpersonal, and human relations skills.

Definitions

Agency: (or Organization) refers to one of a variety of organizations or institutions that offer programs that provide recreation and/or leisure services or facilities. Within the context of the internship experience agency refers to the organization at which the student (intern) will carry out the duties of the internship.

Agency Supervisor: (site supervisor) Individual in the agency who is responsible for directing and supervising the student’s internship experience.

Intern: (or student) the individual enrolled in LSTS 4900/01/02, LSTS Internship.
Internship: the culminating educational experience of the LSTS major, during which the student (intern) engages in a full-time (40 hours per week) experiential learning opportunity in a leisure services agency under the supervision of a qualified agency staff member.

University faculty member supervising the internship. This individual will meet with both the intern and the agency supervisor during the course of the internship and is responsible for assigning the final grade for the course.

Prerequisites & Eligibility Requirements

The internship is intended to be the culminating experience in the LSTS curriculum. As such, it should be the last course completed, undertaken only after all other courses (general education and major) have been successfully completed. Students wishing to enroll in the internship must submit a written request to the LSTS faculty if they have not accomplished the following:

- Achieved a cumulative GPA of at least 2.25 (4.0 scale).
- Satisfactorily completed LSTS 3010, LSTS 3530, LSTS 3540, LSTS 4540, and LSTS 4890.
- Obtain permission of the Faculty to enroll.

Internship Requirements

The Internship is expected to be the culminating learning experience of the student. With very few exceptions students are expected to have completed ALL coursework including LSTS 4890; Pre-internship seminar) before enrolling in the internship.

The university internship coordinator must approve the internship agency and all contracts must be completed, as applicable.

Students must obtain professional liability insurance, which covers minimally the duration of their internship experience. Students may purchase this insurance through the departmental contact, through their own personal or family means, or through a credible insurance agency or other source. The final page in this manual lists potential sources for obtaining insurance. Insurance coverage must be $3,000,000 aggregate/1,000,000 per incident.

The minimum length of time of the internship is 12 consecutive weeks (480 hours).

The intern is expected to be a full-time member of the staff. (“Full-time” is defined as approximately 40 hour work week.) If the agency requires, and the student agrees, the internship may exceed 12 weeks in length and may exceed 40 hours per week. Any variation in number of hours worked must be approved by the LSTS faculty internship supervisor.
Roles & Responsibilities:

*University:*  
1. Assist the student in selection of and placement with a suitable agency which will meet the learning objectives of the internship and the learning needs of the student.  
2. Provide the agency with information concerning the student’s academic preparation.  
3. Make available to the agency and the student a manual of internship procedures including guidelines and expectations.  
4. Enter into a formal contract when necessary with the agency in order to establish the internship and related conditions and expectations.  
5. Provide all necessary reporting forms to the agency.  
6. Interact regularly with the student and agency supervisor during the internship experience.  
7. Visit the student a minimum of one time during the internship period when feasible.  
8. In consultation with the agency supervisor, assign the final grade for the course.

*Agency:*  
1. Assign a qualified staff member(s) to supervise the student during the internship.  
2. Provide the student with clear expectations and responsibilities within the agency.  
3. Conduct formal evaluation of intern performance at least twice during the internship.  
4. Provide input to the university supervisor in order to determine a final grade for the intern.

*Student:*  
1. Develop and submit to the university and site supervisor a statement of goals and objectives to be met during the internship. *These are to be submitted with the first weekly report.*  
2. Conduct themselves as professionals.  
3. Follow all policies and expectations of the agency.  
4. Submit regular, weekly, reports to the university supervisor of experiences during the internship. See weekly report format.  
5. Meet regularly with the agency supervisor to discuss performance and progress.  
6. Meet with the agency supervisor to jointly complete the student’s mid-term and final performance evaluation.  
7. Prepare a summary notebook covering the entire experience to be submitted at the conclusion of the internship.
Evaluation & Grading Policy

The university internship supervisor assigns the grade for the internship. The agency supervisor has significant input in determining the student’s grade through completion of the mid-term and final evaluations. The final grade is based upon an evaluation of the a) On-site work (supervisor mid-term and final evaluations, and feedback); b) MTSU Internship Supervisor evaluation (quality, content, clarity, timeliness, and organization of weekly reports and final report; consideration of the midterm and final evaluation information); and c) the Leisure, Sport, and Tourism Studies’ Major Field Test (MFT) score. MFT points will be awarded based on a percentage of the student’s final MFT score.

Students must complete the MFT during their LSTS 4890 course. The MFT percentage grade will be applied to the summer internship grade in these cases. The date and time for the MFT will be announced to students each semester; students are required to ensure that they complete the MFT on the announced date and time.

Failure to complete any component of the internship requirements may result in failure of the internship.

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<th>Requirement</th>
<th>Points</th>
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<tr>
<td>On-site work (supervisor evaluations, progress reports, etc.)</td>
<td>60 points</td>
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<tr>
<td>MTSU Internship Supervisor Evaluation</td>
<td>25 points</td>
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<td>Major Field Test (MFT) Score</td>
<td>15 points</td>
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<td><strong>Total</strong></td>
<td><strong>100 points</strong></td>
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**Weekly Learning Objectives**

Prior to the start of your field study or internship

**REVIEW THE FOLLOWING REQUIREMENTS:**

**PROGRESS REPORT 1:**
In addition to your progress report requirements (see sample report format) include the following **learning objective:**
- In consultation with your site/agency supervisor, create at least 5 goals for your internship. These should be SMART goals (specific, measurable, attainable, relevant, and time-bound). Describe how you plan to meet these goals.

**PROGRESS REPORT 2:**
In addition to your progress report requirements include the following **learning objective:**
- Describe risk management within the agency, and the agency’s safety policies and practices.

**PROGRESS REPORT 3:**
In addition to your progress report requirements include the following **learning objective:**
- Describe policies and practices within your facility related to accommodating clients and employees with disabilities. Discuss what it’s like to work with people with disabilities with your supervisor and reflect on their answers in your journal entry.

**PROGRESS REPORT 4:**
Also, describe the demographics of the participants in your agency. Do you serve a diverse population? How? Age? Gender? Race/Ethnicity? Sexual orientation? Some other dimension of diversity? Based on what you have learned in your courses, describe at least three different best practices for working with a diverse population. (For example, you might discuss staff training, marketing, pricing, tailoring programming to accommodate a diverse population, etc.)

**PROGRESS REPORT 5:**
In addition to your progress report requirements include the following **learning objective:**
- Describe the program planning process in your agency. Choose an important program or event that you have heard about. Answer these questions. Describe the program or event that you will be discussing. How does this program relate to the organization’s mission? Who is responsible for planning? Is there a separate budget for the program? Who is responsible for the budget? How is the program marketed? What is the demographic most being targeted?
How many people participate?
Describe any special equipment or facilities that are necessary.
How is the program evaluated and/or how are participants’ needs assessed before, during, or after the program?
Based on what you have learned, what could be improved? Why?

PROGRESS REPORT 6:
In addition to your progress report requirements include the following learning objective:
  o In consultation with your site/agency supervisor, review your mid-term evaluation. What things are you doing well? What areas do you need to work on?

PROGRESS REPORT 7:
In addition to your progress report requirements include the following learning objective:
  o Goal check, what is the status of your Goal 1 you set at the beginning of the internship/field study? What do you need to do to achieve these goals?

PROGRESS REPORT 8:
In addition to your progress report requirements include the following learning objective:
  o Goal check, what is the status of your Goal 2 you set at the beginning of the internship/field study? What do you need to do to achieve these goals?

PROGRESS REPORT 9:
In addition to your progress report requirements include the following learning objective:
  o Goal check, what is the status of your Goal 3 you set at the beginning of the internship/field study? What do you need to do to achieve these goals?

PROGRESS REPORT 10:
In addition to your progress report requirements include the following learning objective:
  o Goal check, what is the status of your Goal 4 you set at the beginning of the internship/field study? What do you need to do to achieve these goals?

PROGRESS REPORT 11:
In addition to your progress report requirements include the following learning objective:
  o Goal check, what is the status of your Goals 5 you set at the beginning of the internship/field study? What do you need to do to achieve these goals?
Weekly Progress Report Format

WEEKLY PROGRESS REPORT #___________
LSTS 4901/2/3/4 Weekly Report

Intern Name ___________________________________________________________________________
Email address __________________________ Student Cell Phone: ______________________________
Supervisor __________________________ Phone: ______________________________
Date(s) Worked _________________________________________________________________________
Times Worked __________________________________________________________________________
Total Hours This Week ___________________________ Cumulative Hours ___________________________

Your summarization should include statements about (1) the nature of the week’s work; (2) what
problems you encountered and how they were taken care of; (3) how your agency supervisor
assisted you; (4) what you learned from the experience; (5) any additional statements such as
accomplishments, satisfactions, or suggestions, and overall evaluations.

PLEASE USE THESE HEADERS IN YOUR REPORTS!

Nature of the week’s work

Learning Objective – (see weekly learning objective in manual)
  o For example in the manual, Report 1 learning objective is: Describe risk
    management within the agency, and the agency’s safety policies and practices.

What issues I encountered and how they were taken care of.

How my agency supervisor assisted me this week.

What I learned from my experiences this week.

Any additional statements such as accomplishments, satisfactions, or suggestions, and
overall evaluations.

NOTE: Reports may be submitted to D2L dropbox. The method of delivery should be
confirmed with the internship supervisor prior to the beginning of the internship. All
reports should be typewritten unless prior arrangements are made.
Final Report Format

All interns are required to compile and submit a final comprehensive notebook. This “Summary Notebook” should include sections devoted to the following subjects (Additional materials may also be included).

Description of the agency, (Provide an organizational chart if possible) with particular emphasis on the specific unit, department or program to which you were assigned or which occupied most of your hours on site.

Describe risk management within the agency, and the agency’s safety policies and practices. Describe what you have personally done to assist with risk management for your agency.

Describe policies and practices within your facility related to accommodating clients and employees with disabilities. Discuss what it’s like to work with people with disabilities with your supervisor and reflect on their answers in your journal entry.

Also, describe the demographics of the participants in your agency. Do you serve a diverse population? How? Age? Gender? Race/Ethnicity? Sexual orientation? Some other dimension of diversity? Based on what you have learned in your courses, describe at least three different best practices for working with a diverse population. (For example, you might discuss staff training, marketing, pricing, tailoring programming to accommodate a diverse population, etc.)

Also, describe the program planning process in your agency. Choose an important program or event that you have heard about. Answer these questions.

Describe the program or event that you will be discussing.
How does this program relate to the organization’s mission?
Who is responsible for planning?
Is there a separate budget for the program? Who is responsible for the budget?
How is the program marketed? What is the demographic most being targeted?
How many people participate?
Describe any special equipment or facilities that are necessary.
How is the program evaluated and/or how are participants’ needs assessed either before, during or after the program?
Based on what you have learned, what could be improved? Why?

Also discuss what problems you have solved during your internship. How did your problem-solving while on the job help the agency or your participants?

Describe how you met (or failed to meet) your internship goals. Give specific examples to illustrate your points.

In consultation with your site/agency supervisor, review your final evaluation. What things are you doing well? What areas do you need to work on?

What are the most important lessons, skills and/or knowledge you have gained from this internship experience?

What are your next plans? What jobs have you applied for? How did you choose where to apply? If you’re planning to continue with your schooling instead, what schools have you applied to? What has resulted from your applications?

Student Evaluation of Internship Site (see Appendix B-3)
Student Evaluation of Site Supervisor (see Appendix B-4)
Internship Placement Verification

INTERNSHIP PLACEMENT VERIFICATION

Please type or print only

Student Name: ______________________________ MTSU Phone: __________

MTSU Address:

____________________________________________________________________

Permanent Address:

____________________________________________________________________

Agency:

____________________________________________________________________

Agency Address:

____________________________________________________________________

Agency Phone: (______) _________________________

Internship Supervisor:____________________________________________________________________

Internship Location: __________________________________________________________

(If different than Agency Address)

____________________________________________________________________

Internship start date: _________________ Completion date: _________________

Description of Duties: ______________________________________________________

____________________________________________________________________

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Agency Supervisor’s Signature ________________________________ Student’s Signature ________________________________

Copies of signed agreement to: Agency Supervisor, University Supervisor, Internship Student’s files
Internship Agreement

INTERNSHIP AGREEMENT

The __________________________ agrees to appoint (or employ)
(Name of Agency)

___________________________ as a ____________________________.
(Name of Student) (Position Title)

The period of appointment (or employment) is to begin _____________ and will
terminate on ____________. (use exact dates)

Immediate Supervisor: Alternate Supervisor:

Name: __________________________ __________________________
*CTRS expire date: ____________
Address: __________________________ __________________________
 ________________
 ________________
Phone: __________________________ __________________________
Email: __________________________ __________________________

_____________________________ __________________________
Intern’s Signature Date

_____________________________
Supervisor’s Signature Date
Agency Supervisor’s **Mid Term** Evaluation of Student

**Agency Supervisor’s Mid Term Evaluation of Student**

*This evaluation should be completed jointly at a conference set aside for that purpose.*

Return to:  *LSTS Internship Supervisor, P.O. Box 96, Department of HHP, Middle Tennessee State University, Murfreesboro, TN 37132.*

Intern: ________________________________________________________________

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<th>Position Title</th>
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Agency | Telephone

NOTE: The agency supervisor should rate the intern in each of the following categories. Space is provided following each section for comments. “N.O.” means non-observable or not applicable; “1” means the student fails to meet your expectation for interns; “2” - somewhat below your expectations for students; “3” - meets your expectations for students; “4” - Somewhat above your expectations for students; “5” - well above your expectations for students. A “+” and “-” column allow for variation within each rating.

**PERSONAL COMPETENCIES**

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<td>Interpersonal Relations and Rapport with Peers</td>
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<td>Interpersonal Relations and Rapport with Participants</td>
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<td>Flexibility</td>
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<td>Judgment</td>
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<td>Sense of Humor</td>
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<td>Health Habits</td>
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**COMMENTS:**
## PROFESSIONAL RELATIONS AND COMPETENCIES

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<td>Sensitivity to Participant</td>
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<td>Needs</td>
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<td>Displays Awareness of</td>
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<td>Professional Protocol</td>
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**COMMENTS:**
## PROFESSIONAL WORK COMPETENCIES

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<td>Work Productivity and Task</td>
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<td>Accomplishment</td>
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<td>Ability to Lead and Direct</td>
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<td>Ability to Supervise People and Resources</td>
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<td>Ability to Manage People, Resources, and Programs</td>
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<td>Ability to Organize People and Resources</td>
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<td>Ability to Communicate (written)</td>
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<td>Ability to Communicate (oral)</td>
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<td>Ability to Evaluate Self</td>
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<td>Ability to Lay out Course of Action</td>
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<td>Degree of Professional Growth</td>
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<td>Ability to Adapt Resources and Programs to Situation</td>
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<td>Ability to Anticipate and Rectify Problems</td>
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**COMMENTS:**
**Major Strengths:** Please indicate strengths which have been identified to this point in the internship and how the intern may employ them during the remainder of the internship.

**Major Weaknesses:** Please indicate weaknesses which have been identified during the first portion of the internship and give suggestions as to how the intern may improve during the remainder of the internship.

Considering all aspects of the intern’s performance please give an overall performance rating to date.

(High) _______  (5)  _______  (4)  _______  (3)  _______  (2)  _______  (1)  (Low)

____________________  _______  ____________________  _______
Agency Supervisor’s **Final** Evaluation of Student

**Agency Supervisor’s Final Evaluation of Student**

*This evaluation should be completed jointly at a conference set aside for that purpose.*

**Return to:**  
LSTS Internship Supervisor, P.O. Box 96, Department of HHP,  
Middle Tennessee State University, Murfreesboro, TN 37132.

**Intern:**

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<th>Agency Supervisor:</th>
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**Agency** | **Telephone**

NOTE: The agency supervisor should rate the intern in each of the following categories. Space is provided following each section for comments. “N.O.” means non-observable or not applicable; “1” means the student fails to meet your expectation for interns; “2” - somewhat below your expectations for students; “3” - meets your expectations for students; “4” - Somewhat above your expectations for students; “5” - well above your expectations for students. The “+” and “-“ columns allow for variation within each rating.

### PERSONAL COMPETENCIES

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<th>Initiative and Motivation</th>
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<td>Personal Appearance</td>
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<td>Courtesy and Tact</td>
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<td>Interpersonal Relations and Rapport with Peers</td>
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<td>Interpersonal Relations and Rapport with Authority Figures</td>
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<td>Interpersonal Relations and Rapport with Participants</td>
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<td>Flexibility</td>
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<td>Judgment</td>
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<td>Sense of Humor</td>
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<td>Health Habits</td>
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**Agency Supervisor’s Signature: Date: Student’s Signature: Date:**

**COMMENTS:**
# PROFESSIONAL RELATIONS AND COMPETENCIES

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<td>Work Attitudes</td>
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<td>Manner of Accepting Constructive Criticism</td>
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<td>Manner of Accepting Assignments</td>
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<td>Seeks Learning Situations &amp; Experiences</td>
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<td>Adheres to Policies &amp; Procedures</td>
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<td>Sensitivity to Participant Needs</td>
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<td>Displays Awareness of Professional Protocol</td>
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**COMMENTS:**
### PROFESSIONAL WORK COMPETENCIES

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<tr>
<td>Work Productivity and Task</td>
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<td>Accomplishment</td>
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<td>Problem Solving Ability</td>
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<td>Ability to Lead and Direct</td>
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<td>Ability to Supervise People and Resources</td>
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<td>Ability to Manage People, Resources, and Programs</td>
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<td>Ability to Organize People and Resources</td>
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<td>Ability to Communicate (written)</td>
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<td>Ability to Communicate (oral)</td>
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<td>Ability to Evaluate Self</td>
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<td>Ability to Lay out Course of Action</td>
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<td>Degree of Professional Growth</td>
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<td>Ability to Adapt Resources and Programs to Situation</td>
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<td>Ability to Anticipate and Rectify Problems</td>
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**COMMENTS:**
Major Strengths: Please indicate how the student might use these strengths in the future.

Major Weaknesses: Please indicate how the student might correct or avoid these weaknesses.

Considering all aspects of the intern’s performance please give an overall performance rating (check one).

(High) __________  __________  __________  __________  __________ (Low)

____________________  _______  ______________________  _______
Student’s Evaluation of Internship Site

Student’s Evaluation of Internship Site

Agency: ________________________________ Date: ________________

Instructions: Please rate the strengths and weaknesses of the site in terms of meeting your needs as an internship student. Use the following scale:

5 - excellent  4 - more than adequate  3 - adequate  2 - fair  1 - inadequate

_____ Acceptance of you as a functional member of the staff.

_____ Willingness to integrate you into all appropriate levels in activities, program, and projects.

_____ Provision of relevant experiences in administration.

_____ Provision of relevant experiences in supervision.

_____ Provision of relevant experiences in leadership.

_____ Cooperation of agency staff to provide professional growth experiences through training programs, seminars, and similar activities.

_____ Provision of assistance in helping you meet your personal and professional goals and objectives.

_____ Possession of resources essential to the preparation of professionals (library, equipment, supplies)

_____ Employment of qualified, professional staff with demonstrated capability to provide competent supervision.

_____ Adequate scheduling of conferences with you and ongoing evaluation of your performance, followed up by brief written progress reports.

_____ Allowance for relating classroom theory to practical situations.

_____ Location in reasonable proximity to campus.

_____ Willingness to listen to whatever suggestions or recommendations you might offer.

_____ Willingness to discuss your suggestions with you, explaining the rationale for their acceptance or rejection.

Please provide additional comments which would assist the university in considering this agency for future internship placement (use the back of this page if necessary):

Agency Supervisor’s Signature Date Student’s Signature Date

Were you compensated by the agency during the internship: NO YES Amount: $__________

Were you provided housing or meals? (If yes, please give details.)

Student Name: ________________________________ Student Signature: ________________________________
Student’s Evaluation of Field Supervisor

Instructions: On this form, please evaluate the quality of the supervision you received from your site supervisor during the internship period. Please comment on the following items, but feel free to include other information that you believe is pertinent in the comment section. This evaluation is not shared with your site supervisor.

Interest in you as a person and as a student.

Willingness to discuss the full range of your activities at the site.

Ability to respond to your needs in accomplishing your objectives.

Expression of encouragement and sincerity.

Understanding of philosophy and practices in the profession.

Flexibility in arranging for your tasks in light of changing situations within the site and with you.

Openness to change, innovation, and new techniques.

Please attach additional sheets if you wish to include further comments.

Internship Student ___________________________ Date: ___________________________
Insurance and Background Checks

A. Professional Liability Insurance
Students completing the internship experience are expected to attain professional liability insurance to cover the duration of the internship experience. Expected coverage is $1,000,000.00 per incident and $3,000,000.00 aggregate. Proof of liability insurance is to be shared with the internship agency supervisor. Additionally, it is wise to provide a copy of the proof of insurance coverage to the university supervisor to maintain with the student file.

Listed below are potential website resources for liability insurance. These resources are provided to assist the student in the process of attaining liability insurance and are in no way affiliated with the university. A student may also wish to consult with other avenues to attain professional liability insurance, such as family and/or individual plans.

Resources:
National Recreation and Parks Association
Nrpa.org
Maginnis & Associates
Proliability.com

These sites may have provisions for persons to complete insurance application processes on-line. The prices for insurance coverage may vary, and it is recommended that each student research the situation to make his/her best decision.

Students may also receive assistance obtaining liability insurance through the Health and Human Performance Department. The department will initiate the insurance process with Marsh Affinity Group. Forms may be obtained through Kathy King in Murphy Center 112. After initiation processes are completed, all correspondence regarding the insurance policy will be between the student and the Marsh Affinity Group.

B. Background Checks

Criminal background checks may be a requirement at some sites for training. Based on the results of these checks, an affiliated site may determine to not allow your presence at their facility. This could result in your inability to successfully complete the requirements of this program. Additionally, a criminal background may preclude certification or employment. More information is available from your program director.

Internship Manual Revised: April 2015