

# **General Internship Application**

Use this form for all internship program registration requests Please complete this form in pen or electronically

#### **Student Information**

Name:										
ID#:				Phone #:						
Email:										
Class Level:										
Internship Term:	Fall	Winter		Spring			Summ	er		
(Please circle & indicate year)										
Major:	Minor 1:		Mino	or 2: Mino			r 3:			
Name of Internship Site:										
Internship Title: (no more than 27 o	 characters)									
Course Subject:  (Department for which you are seeking credit –  Ex: HHP, BUS, etc.)  Credit Hours Requesting (Circle One)										
Course Level: 497						work				
Student Responsibilities: Complete the application process and submit all signed documentation to the CEL by deadline*										
1. Complete Student Learning Objectives Section, Sign & Date.										
2. Contact host agency to determine Internship Site Information (job responsibilities, tasks and learning opportunities. Include activities,										
projects, meetings, trainings, etc) Complete Internship Site information and, host site supervisor must sign and date.										
<ol> <li>Meet with Academic Advisor to discuss academic fit for proposed internship and get signed approval.</li> <li>Meet with Faculty Sponsor to determine Learning Outcomes and outline requirements for receiving internship credit and get signed approval.</li> </ol>										
5. Get Department Chair Signature.										
6. Return completed documents to Center for Experiential Learning. (CEL will submit forms to Registrar's office for course credits to be										
<ul> <li>billed to student account) <u>Note: All internships must be registered and billed for the term in which they are being performed.</u></li> <li>Sign the attached Student Responsibilities and Release of Liability Form for Experiential Learning.</li> </ul>										
Recognize that an internship should complement rather than replace in-class coursework.										
Conform to the administrative policies, practices and standards of the college and the host agency.										
In consultation with the host agency supervisor, supervising faculty member, agree upon hours, work schedule, location and										
responsibilities to be performed prior to beginning the internship.  Complete the internship requirements and learning outcomes during the dates specified.										
	Maintain full confidentiality of information supplied by the host agency.									
Report physical, safety or pe	Report physical, safety or personnel problems to the host agency supervisor and to your supervising faculty.									



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1.	<b>Learning Objectives:</b> What new Learning (information, skills, experience) will you gain during your exper	rience?
	Confidentiality Agreement	
	I recognize that my College of Idaho internship host agency may reveal proprietary information to me in the access to information during my internship. I promise that I will not reveal any secret, confidential, or propagin about my host internship agency. If I am not sure the information should be confidential, I will assume it to people outside the host agency, and/or I will not use it for my own personal gain.	rietary information I may
	I recognize and acknowledge that I have moral, ethical and legal obligations to keep the host agency's bus confidential, and I acknowledge that I understand that if I violate this obligation in and substantive manne host agency of The College of Idaho, the host agency and The College of Idaho may take legal action again confidentiality agreement.	er that causes damage to the
Studen	t Signature:	Date:



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#### **Internship Site Information**

Organization Na	me:								
			<b></b>			T			
Street:			City:		State:	Zip:			
Supervisor Name:			Supervisor Title:						
Supervisor Email:			Supervisor Phone:						
Start Date:	End Date:	Hours Per Week: (Part-time =20 hours, Full-time	=21+hours)	Paid Internship: Yes or N					
			-	For Pro	fit:	Yes or No			
<ul> <li>Design a o supervisor</li> <li>Provide th practices, with the s</li> <li>Designate</li> <li>Contact th the studen</li> </ul>	orospective internship ne-semester, individua that is relevant to the e student with a thorod including safety trainin tudent, establish hours an on-site mentor to pe CEL to inform the dirt, provide reasons for s	i, location, and responsibilities rovide quality and experience ector if there is a problem or ij	conjunction ency's admin to be perfor d supervision f in the event	with the si istrative p med prior of the stu that it bed	tudent and olicies, star to the stud dent. comes nece	the faculty ndards and lent beginning work.			
<b>Host Supervisor</b>	Signature:					Date:			



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#### **C** of I Academic and Department Information

3. Academic Advisor: Discuss academic fit for proposed internship								
Signature:					Date:			
<b>4. Faculty Sponsor: (</b> Determing Faculty Handbook max sponsorships not projects per term).								
<ul> <li>Supervising Faculty Member's Responsibilities:</li> <li>❖ Communicate and consult with the host agency and student to facilitate an internship that has academic merit and that allows for a solid practical learning experience.</li> <li>❖ Approve and complete the internship application after reviewing the completed sections submitted by the host agency and student.</li> <li>❖ Assume general responsibility for academic instruction, advising and evaluation of the internship.</li> <li>❖ In a timely manner, respond in partnership with the CEL to any complaints concerning the student.</li> <li>❖ Evaluate and determine a grade for the internship according to established learning outcomes.</li> </ul>								
Faculty Sponsor Signature: Faculty Name Printed:					Date:			
5. Department Chair Signature:								
6. CEL Signature:					Date:			
Registrar Receipt Stamp:	ID#:	Class Standing:		Credits Enrolled:				
	Grad App: Y or N	GPA over: 3.5: Y or N Facu			lty Wkld:			
	Holds:							