



INTERNSHIP APPLICATION FORM

STUDENT INFORMATION

The intern student agrees to the following:

1. Complete this form and obtain signatures of approval, and approval from your BE Faculty mentor. This form is for departmental records and is used to assign a grade at the end of the semester.
2. Discuss with your prospective supervisor at the work site the possible risks and dangers associated with the planned internship. Then complete and sign the **Internship Assumption of Risk Release Form** (see page 10).
3. Discuss with your Faculty Mentor the requirements for the final report to be provided at the conclusion of the internship.
4. Complete all sections of this form, obtain all signatures needed including the BE Faculty Mentor's signature of approval. BAT and BE students must submit the completed form in the appropriate BE D2L Assignment box. Majors from other departments must email the completed form to Ms. Dava Jondall at davaj@arizona.edu, the Department's Academic Program Manager. Dava will enroll the student into the appropriate BE Faculty Internship section number (BE 193, 293, 393, 493 or 593) after the Completed forms are received.
5. Complete all academic assignments and reporting requirements of the internship as specified by the department.
6. Be prepared to perform your internship duties for the hours and duration specified. Talk with the supervisor about any University holidays or time-off requests.
7. Ensure that your internship supervisor (at the company) is able and willing to submit an evaluation on your behalf to your Faculty Mentor. Some organizations have personnel policies prohibiting your supervisor from providing a written intern evaluation. If this is the case, special arrangements must be made for your supervisor to speak directly with the course instructor about your performance.
8. Understand and follow the policies, procedures, rules, and regulations of the sponsoring organization.
9. Recognize that you are representing The University of Arizona as an ambassador to the community. Comply with the University's Student Code of Conduct and Code of Academic Integrity, as well as the standards of conduct for employees of the Sponsoring Organization. I waive and release all claims against the University that arise at a time when I am not under the direct supervision of the University or that are caused by my failure to remain under such supervision or to comply with such codes and academic standards.
10. Recognize that there are dangers and risks to which I may be exposed by participating in this internship.
11. Agree to assume all of the risks and responsibilities that are in any way associated with the internship
12. Complete and submit the **Student's Internship Evaluation Form** (see pages 11-12) to your Faculty Mentor at the conclusion of your internship.
13. I understand and agree that the University and its governing board, administrators, and employees (the "Releasees") do not have medical personnel available at the Sponsoring Organization, which is the site location for my internship. I understand and agree that the Releasees are granted permission to authorize emergency medical treatment, if necessary, and that such action by the Releasees shall be subject to the terms of this Agreement. I understand and agree that the Releasees assume no responsibility for any injury, damage, or cost which might arise out of or in connection with such authorized emergency medical treatment.
14. I have consulted with a medical doctor with regard to my personal medical needs. There are no health-related reasons or problems that preclude or restrict my participation in this internship. I have arranged, through medical insurance or otherwise, to meet any and all needs for payment of medical costs while I participate in the internship.
15. I understand that neither the Releasees nor the Sponsoring Organization are obligated to provide transportation in connection with the internship. I understand that I am expected to carry my own automobile liability insurance coverage.

Student Name

SID #

Emergency Contact Name

Relationship

Telephone Number

DEPARTMENT INFORMATION

The University and Board of Regents have set a standard for 45 hours of work for each unit of internship credit.

The Faculty Mentor agrees to the following:

1. Select students who are in good academic standing.
2. Inform students of the necessity of complying with pertinent department and workplace policies and procedures.
3. Document communications with the student and the work supervisor regarding internship activities.
4. Notify the student that, unless other agreements are made between the student and instructor, the instructor and department will not be responsible for any financial obligations incurred by the student for his/her participation; this includes, but is not limited to, travel and housing arrangements.
5. Notify the student that they, the student, is responsible for their medical care or hold their own insurance. Students may file a claim against the State if they feel the University's negligence caused their injury.
6. If the student's internship involves doing research with human subjects (e.g., collecting data), make sure that Human Subjects training is provided as appropriate to the student's assignment. [Check the Human Subjects Protection Program to determine if training is needed: <http://www.irb.arizona.edu/faqs.html>].
7. Agree with student intern the written report requirements including an essay.
8. Send to the internship supervisor of the sponsoring organization the **Supervisor's Internship Final Evaluation** (see pages 13-14) for completion; specify the deadline for this form to be returned to you.

Faculty Mentor

Faculty Mentor's Section #

Faculty Mentor's Email Address



Internship Work Plan

Student Information

First Name _____ Last Name _____

Student ID Number _____ Phone _____ Email _____

Course Prefix: _____ Term: (Spring, Summer, or Fall + Year) _____

Course Number: _____ Campus: Main Campus UA Online Distance UA South

Number of Units Desired _____

UA policy requires a minimum of 45 hours of work on-site or to complete course assignments per unit of credit earned. The minimum of 45 hours per unit must be met during the dates of the term for each unit of credit desired.

Plans for Contact Hours: Please note that all contact hours counted toward internship credit must occur during the official dates of the UA term for which credit is requested. You can verify term dates at Date and Deadlines page of registrar.arizona.edu.

Start Date: _____ End Date: _____

Duration (# of Weeks): _____ Expected Hours Per Week: _____

International Student: Yes No

International students may be required to apply for and receive work authorization approval from International Student Services (ISS) before participating in an internship. More information can be found on the ISS website under F-1 Student Employment or J-1 Academic Training pages.

Site Supervisor / Preceptor Information

Name: _____

Agency: _____

Work Phone: _____ Email: _____

Physical Office Address City: _____

State: _____ Zip Code _____

Mailing Address (if different than physical office address) _____

City _____ State _____ Zip Code _____ Country _____

Students completing an internship abroad are required to register their travel with UA Study Abroad and follow policies and procedures related to international insurance coverage.

Internship Purpose: The student should work with the site to develop a mutually-agreeable internship purpose, three to five learning objectives, and a list of related activities that will be completed during the internship. It is recommended that the student discuss with the site supervisor his/her goals and progress toward objectives at the start, mid-point and end of the internship. For examples, see the final page of the work plan (page 8 of this document).

Purpose Statement:

Learning Objectives (Minimum of three)	Proposed Activities (Typically no more than five activities per learning objective)

Student's Goals for the Internship: The student should identify one to three professional goals explaining what s/he wants to gain from the internship experience.

Site Justification: The student is required to provide a short paragraph about how an internship at this site will assist with attaining his/her career goals and will be a learning experience that enhances the academic program.

Section to be completed by the Preceptor/Site Supervisor

Note: At the discretion of the academic department, a formal letter of offer on organizational letterhead or organizational email bearing the supervisor's signature may be attached in lieu of this section. A position description may also serve as useful documentation of expected activities and qualifications.

<p>Status of Intern (a brief description of the intern’s status within the agency – for example, expected number of hours worked/weekly, any wages or benefit compensation)</p>	
<p>Intern Minimum Qualifications (for example, major, previous work experiences, other special skills)</p>	
<p>Training Plans (for example, orientation to site and responsibilities)</p>	
<p>Requirements for the Intern (for example, any expectations regarding job functions, office conduct, attendance policies)</p>	
<p>Identifying possible risks (for example, any significant obvious and non-obvious risks of participation)</p>	
<p>Other</p>	

By signing this document as the site supervisor for an intern earning University of Arizona academic credit, I understand that the work plan outlines the mutually agreed upon proposed activities which the intern will be responsible for fulfilling and which the site will be responsible for providing as a part of the experience. Changes to work plans are a normal part of any internship, and are permissible as long as the activities remain with a relevant learning focus and all parties agree to the changes.

SITE SUPERVISOR: _____

DATE: _____

By signing this document, I understand that I am responsible for fulfilling the proposed activities at the internship site plus all assigned coursework in order to earn academic credit for this internship experience.

STUDENT: _____

DATE: _____

Reminder: Students will not be enrolled in the internship units until the signed work plan is also approved by the Internship Instructor.

INTERNSHIP INSTRUCTOR NOTES:

INTERNSHIP INSTRUCTOR APPROVAL: _____

DATE: _____

Examples of Goals, Purpose, Learning Objectives, and Activities

Goals: Long-term aims that the intern wants to accomplish.

Purpose Statement: The reason that the intern and agency are collaborating.

Learning Objectives: Concrete attainments that can be achieved by following a certain number of activities.

Goals, purpose statements, and objectives are often used interchangeably, but the main difference comes in their level of concreteness. Learning objectives are very concrete, whereas goals and purpose statements are less structured.

Activities: The specific steps or actions the intern will take to achieve the objectives. (Note to intern: these activities can be steps/actions you will take on your own AND/OR steps/actions you will take *with* your preceptor or team from your agency.)

Example Goals:

- I hope to gain knowledge about walkability, which is an importable public health issue because of the impact that it has on my community (physical health and environmental health).
- I would like to develop survey/evaluation and health communication writing skills so that I can improve my chances of getting a job with a public health non-profit after graduation.
- I plan to increase my public health professional network by making positive connections at my internship site and partner organizations.

Example Purpose: The intern and agency will collaborate to (1) increase the intern’s knowledge and skills in the public health area of the built environment; (2) benefit the agency since a desired outcome of the internship is a walkability recommendation report and community brief that the intern co- authors.

Example Learning Objectives	Example Proposed Activities
Research and describe the following: what walkability means; tools for measuring walkability; and existing reports on Tucson’s walkability	<ul style="list-style-type: none"> • Conduct a literature review to understand walkability and the impact of built environments on the public’s health • Review tools for measuring walkability • Review factors and policy that are unique to Tucson’s built/walkable environment • Prepare and deliver a presentation on my findings for my internship agency
Evaluate Tucson’s walkability	<ul style="list-style-type: none"> • Design a survey (based on existing tools) • Collect survey data • Analyze survey data • Make recommendations • Prepare a report and presentation on survey findings that my internship agency will use with local government officials
Educate the public about the importance of walkable communities	<ul style="list-style-type: none"> • Write community brief based on recommendations • Ask community partners to support brief by sharing it with their stakeholders • Send brief to local media outlets

RISK MANAGEMENT SERVICES

University Services Annex 300B
220 W Sixth St., East Building 2nd Floor PO
Box 210300
Tucson, Arizona 85721-0300

Ofc: (520) 621-1790
Fax: (520) 621-3706

<http://risk.arizona.edu/>

DISCLOSURE: INSURANCE COVERAGE FOR UNIVERSITY INTERNSHIPS FOR CREDIT

INTRODUCTION

This document is prepared to provide guidance to students and academic programs regarding the types of insurance coverage available to students enrolled in university internship opportunities. The University of Arizona participates in a statutory program of insurance administered by the Arizona Department of Administration, Risk Management Division, as authorized in Arizona Revised Statutes §41-621 *et seq.*

Insurance coverage described herein is governed by the provisions outlined in this statutory insurance program.

WHAT ARE INTERNSHIPS?

An internship is a guided learning experience offered by an organization with the student's academic program and preparation for future employment in mind. An internship is a temporary practical assignment, usually lasting only 1-2 academic terms, with no guarantee of ongoing or future employment. To award credit for internships, academic departments require academic assignments, assess learning, and determine whether/how much academic credit is due.

Students must coordinate with the designated individual within their academic department to determine if the internship will be eligible for academic course credit, and what documentation will be required to support award of credit. The nature of the for-credit internship, and the arrangement in place between the UA and the training site will also influence the availability of one or more types of insurance coverage listed below.

INTERNSHIP DOCUMENTATION

Insurance coverage for university internships for credit may be applicable if there is written approval from the academic advisor or faculty member that documents a connection between the training opportunity and the student's academic program curriculum. The University of Arizona recommends that this approval be documented by the UA Student Intern Work Plan form and include acknowledgement by the student of receipt of this insurance disclosure.

A training affiliation agreement between the UA and the training site is the preferred method to document an ongoing relationship, and establish the responsibilities of all parties, when the training site does not consider student interns to be employees of their organization.





Affiliation agreements specify which party provides insurance coverage, and the type and extent of that coverage. If there is an expectation that an internship relationship with a training site will be continuing, and the site does not consider interns to be employees of the organization, the academic program should consider formalizing an affiliation agreement with the training organization. Contact Sponsored Projects and Contracting Services or Arizona Health Sciences Contracting for guidance.

If there is no written approval documentation establishing a UA connection to the internship or training activity as a part of the student's academic program, such as the UA Student Intern Work Plan form, UA insurance is NOT APPLICABLE to that activity. In such cases, the student participant assumes all risk of participation.

TYPES OF INSURANCE

Several types of insurance may be applicable to an internship opportunity. These are listed and discussed in detail below:

Liability Insurance (General and Professional Liability) – This coverage insures an individual or an organization against claims alleged to be the result of negligent acts or omissions. An intern, acting in the course of their authorized duties, is insured by the State of Arizona for liability claims that allege injury or harm caused by the negligence of the intern. Liability insurance pays for legal counsel to defend that claim, and pays damages awarded to the claimant either through settlement or jury award if the case goes to trial. The statutory insurance program described above covers both general and professional liability.

Worker's Compensation – This insurance covers on-the-job injuries to employees, including authorized medical treatment expenses and lost wages if the injury requires missing work. If an internship training site hires a student intern as an employee, then that employer is responsible for providing worker's compensation coverage.

International Insurance – University insurance covers international travel only when it is conducted as a part of official university business. University processes for travel authorization and itinerary registration must be followed to identify the travel as having an official UA purpose, and to ensure rapid access to insurance and assistance if needed while abroad. Most internship experiences are not considered university business.

Students registered for Study Abroad units are automatically enrolled in an international insurance program that provides emergency medical care, emergency evacuation, etc. All other students interning internationally are responsible for their own travel and emergency coverage. Contact UA Study Abroad for guidance.

Health Insurance – University students are expected to arrange for their own health insurance through Campus Health, through a family relationship, or directly from a health insurance provider.

UA Risk Management Services (RMS) coordinates university insurance coverage with the State of Arizona, and can assist university departments with coverage questions, and determining which type of insurance is applicable to a particular situation. Contact RMS at 520-621-1790 or risk@email.arizona.edu for assistance.

Internship Assumption of Risk Release

I acknowledge that I have reviewed and understand the University of Arizona Risk Management Disclosure: Insurance Coverage for University Internships for Credit (pages 8-9 of this document).

STUDENT: _____

DATE: _____

STUDENT'S INTERNSHIP EVALUATION FORM

(To be completed by the Intern)

This form is for you (the student) to assess your internship experience. *At the conclusion of the internship, by the end of the semester or summer term, complete this form and give it to your course instructor.*

Intern Name: _____

Sponsoring Organization: _____ **Sponsoring Supervisor:** _____

Internship Instructor: _____ **Internship Department:** _____

Course Number and Section: _____ **Semester(s) of Internship:** _____

Place an X in the box of the number that best reflects your level of agreement/disagreement with each of the following statements. **1 = Strongly Agree; 5 = Strongly Disagree**

	1	2	3	4	5
I achieved my learning goals during the internship.					
Through my duties, I received training in a profession/field related to my studies.					
I experienced some of the realities of working in the profession/field.					

Evaluate the following aspects of your internship by placing an X in the box of the number that best reflects your experience. If the aspect does not apply, leave it blank. **1 = Outstanding; 5 = Unsatisfactory**

Work Environment:

	1	2	3	4	5
Clarity of organizational structure					
Access to necessary materials and/or equipment					
Collegiality/friendliness of the employees					
Attitude of respect for interns					

Comments:

Support and Feedback:

	1	2	3	4	5
From your supervisor					
From other employees with whom you interacted					

Comments:

Opportunity to be Creative:

	1	2	3	4	5
Willingness of others consider to your ideas					

Comments:

Interaction with Others:

	1	2	3	4	5
Opportunity to contribute to a team project					
Questions were encouraged and answered.					
Access to one or more mentors (supervisor or employees)					

Comments:

Overall Evaluation of Internship (highlight one): **Superior** **Excellent** **Satisfactory** **Unsatisfactory**

At the conclusion of your internship, please complete and return this form and your final report to your Faculty Mentor.

Any Additional Comments:



SUPERVISOR'S INTERNSHIP EVALUATION FORM

This form, **to be completed by the intern's on-site internship supervisor**, is meant to provide constructive feedback to the student and Faculty Mentor about the student's relative strengths and weaknesses as demonstrated in the internship. Unless the evaluation is extremely positive or negative, it will not significantly affect the student's grade for the internship, which is primarily based on the quality of the related academic coursework.

Student Name: _____ Semester(s) of Internship: _____

Sponsoring Organization: _____ Organization Supervisor: _____

The supervisor should evaluate the intern as objectively as possible by selecting the number in each range that best describes the intern's performance for that characteristic. If the quality in question is irrelevant to the work the student has been performing, please circle "N/A" (not applicable).

Attitude	Excellent	5	4	3	2	1	Poor	N/A
Dependability	Excellent	5	4	3	2	1	Poor	N/A
Ability to Learn	Excellent	5	4	3	2	1	Poor	N/A
Skills and Accuracy in Work	Excellent	5	4	3	2	1	Poor	N/A
Quantity of Work	Excellent	5	4	3	2	1	Poor	N/A
Quality of Work	Excellent	5	4	3	2	1	Poor	N/A
Relations with Others	Excellent	5	4	3	2	1	Poor	N/A
Initiative	Excellent	5	4	3	2	1	Poor	N/A
Communication Skills – Written	Excellent	5	4	3	2	1	Poor	N/A
Communication Skills – Oral	Excellent	5	4	3	2	1	Poor	N/A
Organizational Skills	Excellent	5	4	3	2	1	Poor	N/A
Attendance	Excellent	5	4	3	2	1	Poor	N/A
Punctuality	Excellent	5	4	3	2	1	Poor	N/A
Flexibility	Excellent	5	4	3	2	1	Poor	N/A
Observance of Rules, Policies, and Procedures	Excellent	5	4	3	2	1	Poor	N/A
Leadership	Excellent	5	4	3	2	1	Poor	N/A
Creativity	Excellent	5	4	3	2	1	Poor	N/A
Responsiveness to Feedback	Excellent	5	4	3	2	1	Poor	N/A

Other Skills Unique to Position								
1.	Excellent	5	4	3	2	1	Poor	N/A
2.	Excellent	5	4	3	2	1	Poor	N/A
3.	Excellent	5	4	3	2	1	Poor	N/A

What are the student’s outstanding strengths?

In what areas does the student need improvement?

How often did you provide feedback to the intern about his/her work?

Weekly_____ Monthly_____ 1-2 times_____ Never _____

Verification that student has worked a minimum of___hours per week at this internship.

Comments:

Organization Supervisor’s Signature

Date

At the conclusion of the student’s internship, please complete and return this form to the Faculty Mentor identified on page 2 of this document.