Internship Information and Application
M.S. Program in
Organizational Development & Leadership

The following policies clarify and extend the University’s policies on internships, found in the current Shippensburg University Catalog. These policies make the handling of internships consistent throughout the College of Arts and Sciences, although the Organizational Development & Leadership program may apply additional criteria.

✓ Students seeking internships must file the signed paperwork in the dean's office on or before the following deadlines: spring—December 1; summer or fall—June 1.

✓ Graduate students must have been matriculated in a graduate program to qualify. ODL students must have a minimum GPA of 3.00 in the program.

✓ It is recommended that graduate students in the ODL program have completed 18-21 credits in the program prior to taking the internship.

✓ Students must fill out the attached Letter of Agreement, which, after receiving approval, the department will keep for a minimum of three years.

✓ During the regular academic year, students should keep a daily log during the first two weeks of their internship and a weekly log thereafter, submitting it monthly to their faculty internship coordinator. (This may be adjusted for summer terms.) At the end of the internship, the student should submit a seven- to ten-page report to the faculty member of record, detailing the activities from the internship and describing how these activities met his/her stated educational goals.

✓ The ODL Director of record must make every reasonable effort to visit interns, and in cases where this is not possible, the faculty member must contact both the student and the employer by phone during the period of the internship. At the midterm and end of the internship, employers should complete the Organization Internship Evaluation and return it to the faculty member of record.

✓ At the end of the internship, the student should complete the Student Internship Evaluation, which the internship coordinator will review and keep in the department office for three years.

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Letter of Agreement among
Intern, Organization and College of
Arts and Sciences

M.S. Program in Organizational Development & Leadership

It is understood that ________________________________ will:

✓ Work as an intern at ________________________________ from _______________ to _______________.
✓ Adhere to all policies of the organization with whom s/he is interning; if applicable, compensation will be provided at the rate of $________/hour;
✓ Report to work promptly and in the event of an emergency notify the organization and intern supervisor immediately;
✓ Direct energies to the completion of the work assignments;
✓ Adhere to policies of the college and of the respective department(s);
✓ Keep a daily log of activities for the first two weeks and a weekly log thereafter; submit at the end of every month (or prearranged period in the summer) a summary of the activity log;
✓ Submit a seven- to ten-page report at the end of the internship; and
✓ Complete the Student Internship Evaluation at the end of the internship and return to the faculty internship coordinator.

It is understood that the Organization will

✓ Recognize the student as a trainee and provide appropriate experiences and adequate supervision;
✓ Assure safe and healthy conditions;
✓ Accept responsibility for supervising and evaluating the work of the student and return evaluation reports to the faculty internship coordinator;
✓ If for any reason termination of the internship is necessary, meet with both the student and faculty member of record at a special conference;
✓ Provide the internships without regard to race, sex, or religion;
✓ Provide compensation on a voluntary basis; and
✓ Fill out and return the Organization Internship Evaluation to the faculty internship coordinator at the mid-term and end of the internship.

It is understood the College of Arts & Sciences will

✓ Provide instruction concurrent with the internship as applicable;
✓ Arrange for supervision by the faculty member of record who will visit the student and the organization at least once a semester or have telephone contact if distance is a factor;
✓ Provide guidance for special student problems; and
✓ Grant academic credit as approved toward the completion of the student’s degree if the conditions of the internship are fulfilled in accord with University policy.

Finally, it is understood that the intern, Organization, and College of Arts & Sciences will adhere to all applicable local, state, and federal regulations.
**Letter of Agreement, Continued**

To be completed by the student *(Please word process, save, print, sign, obtain necessary signatures, and turn into Dean’s Office):*

Student’s Name (Last, First, Middle): ____________________________  □ Undergraduate □ Graduate

Student ID Number (not Soc. Sec. #): ____________________________  Ship E-mail: ____________________________________________

Student’s Permanent (Home) Address: ____________________________  City: ______  State: ____  Zip: ___

Local Address (if different from above): ____________________________  City: ______  State: ____  Zip: ___

Major/Minor: ____________________________________________  Phone Number: (___) ____ - ______

Major Department: ____________________________________________  Total Earned Credits: ____________________________

First internship for credit?  Yes ___  No ___  Total Earned Internship Credits: ____________________________

Faculty Supervisor: ____________________________________________  Overall GPA: ____ / 4.00  Major GPA: ____ / 4.00

Internship Semester: □ Spring □ Summer □ Fall  20 ________  NOTE: Application is for one semester only.

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Name of the Organization: ______________________________________

Organization’s Website: _________________________________________

The organization is  □ Non-Profit □ On-Campus □ Government □ Private

Organization’s Address: ____________________________  City: ______  State: ____  Zip: ______

Site Supervisor’s Name (Last, First): ____________________________  E-mail: ________________________________

Supervisor’s Phone Number: (___) ____ - ______  Supervisor’s Fax Number: (___) ____ - ______

Intern’s Job Title: ____________________________________________  Paid position?  □ Yes  □ No

Estimated TOTAL # of work hours: ______  Hours of academic credit (40 work hours = 1 credit hour): ______

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To be completed by the Dean’s Office or Major Department Personnel:

Student’s Name (Last, First, Middle) ____________________________

SU ID #____________________________ Semester #________________________

Course #_______ Section ___ Faculty__________________________ Credits (#)___

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PLEASE READ BEFORE SIGNING: By signing this document, the student, faculty internship advisor, department internship coordinator, and the organization supervisor have read and agreed to the described activities, learning objectives, and classification of unpaid internships (described on the previous page).

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(1) Student Name PRINT  (1) Student signature /Date

(2) Faculty Internship Advisor PRINT  (2) Faculty Internship Advisor signature /Date

(3) Department Internship Coordinator PRINT  (3) Department Internship Coordinator signature /Date

(4) Organization Supervisor PRINT  (4) Organization Supervisor signature /Date

(5) Dean/Associate Dean, Arts & Sciences signature /Date

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Letter of Agreement, Continued

Please answer the following two questions in some detail. If needed, continue on a separate sheet.

1) Describe your anticipated activities, tasks, and projects during the internship.

2) Describe your career and educational goals and how this internship will strengthen these goals.

3) Mission of sponsoring organization.

4) Potential duties of intern (MUST BE COMPLETED BY SPONSOR).

In accordance with The Fair Labor Standards Act, the U.S. Department of Labor (April 2010) acknowledges unpaid internships as “fair” and legal only if the [below] six criteria are met.

The following six criteria must be applied when making this determination:
1. The internship, even though it includes actual operation of the facilities of the employer, is similar to training which would be given in an educational environment;
2. The internship experience is for the benefit of the intern;
3. The intern does not displace regular employees, but works under close supervision of existing staff;
4. The employer that provides the training derives no immediate advantage from the activities of the intern; and on occasion its operations may actually be impeded;
5. The intern is not necessarily entitled to a job at the conclusion of the internship; and
6. The employer and the intern understand that the intern is not entitled to wages for the time spent in the internship.

NOTE: If you have questions regarding whether or not your internship qualifies, please contact Dr. Kim Long, Associate Dean of the College of Arts and Sciences, at (717) 477-1151 or by e-mail at kmlong@ship.edu.

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Student Internship Evaluation
M.S. Program in
Organizational Development & Leadership

Please word process—completed by student.

Student’s Name: ________________________________ Major Department: _______________________

Job Title (if applicable): ________________________________________________________________

Faculty Internship Coordinator: __________________________________________________________

Name of the Organization: __________________________________________________________________

Organization Supervisor’s Name: ___________________________________________________________

Address of the Organization: __________________________________________________________________

Dates of the Internship: From _________ to _________ Hours of Academic Credit: _________

Total number of hours worked: __________________________ Hourly rate or stipend, if applicable: _________

1. What aspect of your internship was most valuable to you as a student?

2. Did your internship in any way encourage or discourage you from pursuing your intended career goals? Please explain.
3. Do you feel that your internship experience was appropriate for your needs? Did it meet your expectations? If not, please explain.

4. Was there early and adequate clarification of what your employer expected from you?

5. Would you encourage other students in your major to seek an internship with the same organization?

6. Can you provide names of individuals or other agencies that would be interested in offering internships or job placement for student in your department? Please list.
Organization Internship Evaluation
M.S. Program in
Organizational Development & Leadership

☐ Mid-term Evaluation Report  ☐ Final Evaluation Report

Please word process—completed by sponsor.

Student’s Name: _______________________________  Date: __________________________

Dates of Internship: From ____________________ to ______________________

Name of the Organization: ______________________________________________________

Organization Supervisor’s Name: ________________________________________________

Please complete the form based on your observation of the individual’s performance in the designated areas. This sheet will constitute your professional evaluation of the candidate, and may be used in determining the student’s internship grade. In order to comply with the Commonwealth of Pennsylvania’s “Right to Know” Law and Federal Family Educational Rights and Privacy Act of 1974, your comments will be available for review by the student upon request.

5—Outstanding performance  2—Inconsistent Low Level performance
4—Consistent High Quality performance  1—Unsatisfactory performance
3—Satisfactory performance  N—Not observed

For each question, circle one answer (1 is low, 5 is high):

1. Ability to learn  2 3 4 5 N
2. Attitude toward work  2 3 4 5 N
3. Relation to co-workers  2 3 4 5 N
4. Reaction to supervision  2 3 4 5 N
5. Quality of work  2 3 4 5 N
6. Dependability  2 3 4 5 N
7. Judgment  2 3 4 5 N
8. Intern’s academic preparation  2 3 4 5 N

Attendance: ☐ Regular ☐ Irregular  Punctuality: ☐ Regular ☐ Irregular

1. If this is a final evaluation, have you observed significant changes in this intern’s performance since the time of the mid-term evaluation?

☐ Yes  ☐ No

2. If this were a final evaluation, hypothetically, would you be willing to hire this intern after graduation, if a suitable position were available?

☐ Yes  ☐ No

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Organization Internship Evaluation, Continued

The student’s overall performance in the internship is/was:

☐ Poor  ☐ Satisfactory  ☐ Good  ☐ Very Good  ☐ Outstanding

Comments (Include remarks regarding areas showing strength, areas needing development, and any additional comments that will aid in determining the candidate’s capabilities and potential for professional development):

Rated by:

Organization Supervisor ______________________ Title ______________________ Date ____________

Reviewed by:

Faculty Internship Advisor ______________________ Title ______________________ Date ____________

Please return to the Faculty Internship Advisor. Advisor, submit a copy to the dean’s office.

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