

Southern Utah University
Communication Department

INTERNSHIP GUIDELINES

To qualify for an internship, you **MUST** have Junior or Senior status and completed and received at least a C- in the specified courses for your emphasis.

You must receive prior approval from the appropriate faculty advisor and the Department Chair before beginning the internship.

Otherwise, NO CREDIT WILL BE GIVEN.

Follow the steps below to set up your Internship:

1. Meet with the faculty advisor about your qualifications. Come with your own ideas about locations.
2. Contact the prospective employer and discuss the possibilities of your interning within their organization.
3. Get an internship packet from the department administrative assistant or the faculty advisor. This packet contains all the forms necessary to complete the paperwork portion of your internship. Follow the directions on the cover sheet carefully.
4. Submit the internship proposal form found in the internship packet. **This form MUST be signed by the faculty advisor and the Department Chair before work begins on the internship.**
5. At the completion of the internship, you **must** complete the STUDENT EVALUATION FORM found in the internship packet.
6. At the completion of the internship, you **must** have your employer/supervisor fill out the INTERNSHIP PERFORMANCE EVALUATION form, also found in the internship packet.
7. The STUDENT EVALUATION FORM and the INTERNSHIP PERFORMANCE EVALUATION form are then to be turned into the department secretary.
8. At the Registrar's office, sign up and pay for the appropriate number of credit hours for your internship, if you haven't already done so. (The internship packet contains a worksheet to establish credit for the internship.)

ACADEMIC CREDIT IS ISSUED ONLY AFTER ALL FORMS AND AGREEMENTS ARE COMPLETED AND RETURNED TO THE DEPARTMENT ADMINISTRATIVE ASSISTANT.

****AN INTERNSHIP IS NOT AN AUTOMATIC GRADE****

FORMULA FOR ESTABLISHING CREDIT FOR INTERNSHIPS			
Credits	Time Invested Per Week	Total Hours Completed Per Semester	Class
1	3 hours minimum	45	4890-01
2	6 hours minimum	90	4890-01
3	9 hours minimum	135	4890-01
4	12 hours minimum	180	4890-01
5	15 hours minimum	225	4890-01
6	18 hours minimum	270	4890-01
7	21 hours minimum	315	4890-01
8	24 hours minimum	360	4890-01
9	27 hours minimum	405	4890-01

Advertising

- COMM 1610 Newswriting
- COMM 2300 Introduction to Public Relations
- COMM 2080 Introduction to Advertising
- COMM 2750 Interpersonal Communication
- COMM 3070 Communication Graphics
- COMM 3080 Advertising Copywriting and Layout

Broadcasting

- COMM 2200 Television Production
- COMM 3504 Practicum-TV Lab

Interpersonal

- COMM 1010 Introduction to Communication
- COMM 2750 Interpersonal Communication
- Either COMM 4010 Persuasion or COMM 3850 Organizational Communication

Journalism

- COMM 1610 Newswriting
- COMM 3070 Communication Graphics
- COMM 4140 Advanced Reporting
- COMM 4260 Media Law

Public Relations

- COMM 2300 Introduction to Public Relations
- COMM 2950 Public Relations Case Studies
- COMM 3950 Public Relations Writing

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INTERNSHIP PROPOSAL FORM

STUDENT NAME: _____ **DATE:** _____

SUU T# (or SOCIAL SECURITY NUMBER): _____

STUDENT PHONE NUMBER: _____

SEMESTER & YEAR INTERNSHIP PERFORMED: _____

SEMESTER INTERNSHIP CREDIT WILL BE TAKEN: _____

REFER TO TABLE TO FIGURE PROPOSED CREDIT HOURS: _____

Hours Per Week _____ # of weeks _____ Total Hours _____

COMPANY/ORGANIZATION: _____

SUPERVISOR: _____

SUPERVISOR'S PHONE: _____

SUPERVISOR'S ADDRESS: _____

OBJECTIVES OF INTERNSHIP:

ACTIVITIES YOU WILL PERFORM:

Student's Signature: _____

Faculty Advisor's Signature: _____

Department Chair's Signature: _____

After signatures are acquired, turn this form in to the department secretary, CN, Room 213.

Date Received	Required Documents
	Proposal Form
	Permission Form: <i>Original to Registrar's Office</i> <i>Copy kept with student internship packet</i>
	Student shows in COMM 4890 class roster
	Student Emphasis shows on Crystal Concentration Report <i>If no emphasis shows then complete a change of major form -</i> http://suu.edu/ss/registrar/pdf/MajorChangeForm.pdf
	Student info listed on excel spreadsheet
	Check Up form done during 4 th week of semester
	Student Evaluation
	Supervisor's Evaluation
	Hours verified
	Semester Internship Performed
	Semester Credit taken
	<i>Semester Credit taken – if split due to credit/tuition cost factor</i>
	Grade posted to Banner

Internship Permission Form

Name: _____ T Number _____

FALL _____ SPRING _____ SUMMER _____ YEAR _____

CRN	Course ID (ex. COMM1010)	SEC	CREDITS	INSTRUCTOR SIGNATURE	DEPT CHAIR SIGNATURE

Additional Information Required

Company Name _____

Company Address _____

State, Zip Code _____

Work Supervisor _____

Work Supervisor Telephone _____

Internship Waiver of Liability

By going into functioning programs, rather than remaining in an on-campus classroom, students may expose themselves to greater risks. For example, in many placements the host agency does not assume liability for injury or harm to the SUU students who serve/work/volunteer in the program. Likewise employees of these agencies are not personally responsible for harm which may come to SUU students in the course of their carrying out their services and educational activities. Southern Utah University similarly assumes no liability for any such risk.

Given the supervision and limited case loads, SUU students are rarely exposed to even as much risk or harm as ordinary human service workers. Nevertheless, the potential for transportation accidents, and some emotional or mental distress, is present. SUU students are expected to exercise reasonable caution and to provide their own insurance to cover such harm, should it occur.

Students are also expected to conduct themselves according to the host agency's policies and procedures and according to the training which they receive, so as to further reduce risks of harm.

The intent of the practicum/cooperative/internship courses is to provide academic credit to SUU students who wish to gain educationally meaningful field experiences. The student, as a legal adult, assumes primary responsibility for the consequences of his/her conduct, for accidents, and for other harm or injury that may occur, recognizing that this learning format is more active and involved than the traditional classroom setting.

By signing below I affirm that I have read this statement and have had my questions regarding risk and liability answered. Also, by signing below, I assume all risks that may be inherent in and associated with the internship(s) in which I will be involved. I also waive any claim against Southern Utah University, its agents and employees, for any harm, injury, damage or claim that may result from my involvement in the practicum(s), cooperative(s) and internship(s) experience which does not occur as a direct result of the University's gross negligence. I further agree to indemnify the University and hold it and its agents and employees harmless from any such harm, injury, damage or claim that affects me or someone else as a result of my involvement.

Student's Signature & Date

Southern Utah University
Communication Department

STUDENT EVALUATION FORM

STUDENT NAME: _____ DATE: _____

ORGANIZATION/COMPANY: _____

SUPERVISOR'S NAME: _____

1. What was your job title?
2. Describe your specific duties and responsibilities.
3. Did you work with any equipment or software? If so, identify the equipment and software, and any skills you learned relative to its use and operation.
4. Did you learn any organizational or administrative skills? If so, please describe them below.
5. What were the tasks you accomplished and projects you completed?
6. Describe what you *most* enjoyed about the internship.
7. Describe what you *least* enjoyed about the internship and why.
3. How helpful was your supervisor as a mentor/teacher? Circle one: 1 2 3 4 5
1-Poor, 2-Below Average, 3-Average, 4-Above Average, 5-Excellent
Please Explain:

4. Was this internship a valuable experience for you? If yes, how so? If no, why not?

5. Please rank the five most important aspects of this internship experience to you:
(i.e. skills learned, working with professionals, etc.)
 - 1.
 - 2.
 - 3.
 - 4.
 - 5.

6. How were you reacted to by:
Support Staff?

Co-workers?

Supervisor?

7. To what degree did your work require you to use your academic and co-curricular background?

8. What did you learn that you would use in future organizational involvement and career field?

9. What did you learn about your potential career field?

10. Would you recommend this internship to other students? Please explain.

11. Additional comments or observations about your internship.

Please retain a copy for yourself, and return one to the department administrative assistant in EVT 213.

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Communication Department

INTERNSHIP PERFORMANCE EVALUATION

This form is to be completed by the Internship Supervisor

INTERN'S NAME: _____ DATE: _____
COMPANY/ORGANIZATION: _____
SUPERVISOR: _____

1. List the total number of hours the intern worked. _____
2. Please rate from 1 to 5 each of the following aspects of the intern's performance.
(1 being poor, 5 being excellent)
- | | |
|--|---|
| <input type="checkbox"/> Punctuality | <input type="checkbox"/> Dependability |
| <input type="checkbox"/> Quantity of Work Accomplished | <input type="checkbox"/> Enthusiasm |
| <input type="checkbox"/> Quality of Work Accomplished | <input type="checkbox"/> Ability to Think/Act Independently |
| <input type="checkbox"/> Willingness to Learn | <input type="checkbox"/> Ability to Get Along With Other |
| <input type="checkbox"/> Skills | |

3. Please rate from 1 to 5 each of the following skills (as applicable) that were used by the intern.
(1 being poor, 5 being excellent)
- | | |
|--|--|
| <input type="checkbox"/> Research | <input type="checkbox"/> Workshop Facilitation |
| <input type="checkbox"/> Writing | <input type="checkbox"/> Interdepartmental Relations |
| <input type="checkbox"/> Layouts | <input type="checkbox"/> Administrative/Organizational |
| <input type="checkbox"/> Communication | <input type="checkbox"/> Other (please specify) |

4. Would you utilize this student again as an intern?

5. Please use this space to make any additional comments about this intern you feel are appropriate.
Indicate any particular strengths/weaknesses. (Use back of page if necessary.)

Signature of Intern Supervisor: _____

Return this form to the intern or mail directly to the Communication Department secretary at the address below. (You may retain a copy of this form, if desired.)

Paige Smith
Communication Department
Southern Utah University
351 West University Blvd., EVT 213
Cedar City, UT 84720