



# Texas Wesleyan UNIVERSITY

## Internship Packet Information and Forms

---

Please follow the directions on how to complete your portion of this packet based on the information under your header below. Thank you.

### **Student:**

- Contact appropriate academic department to discuss internship placement and departmental requirements.
  - Complete *Internship Application and Acknowledgment Form* (page 1) and return to academic department faculty/internship coordinator.
  - Consult with academic department/internship coordinator regarding possible on-site interview or other departmental requirements to establish/set up internship.
  
- Submit resume to Career Services for review:
  - Send resume as an attachment to [careerservices@txwes.edu](mailto:careerservices@txwes.edu).
  - Type "Internship Resume Submission" in the subject line of the email.
  
- Discuss/confirm internship location, employer contact information, and dates of internship period with academic department/internship coordinator.
  
- Obtain syllabus from academic department/internship coordinator and review syllabus with coordinator.
  
- Register for appropriate class with appropriate number of credit hours
  - Use "Internship Request" form available on the Registrar's webpage: <http://www.txwes.edu/registrar/documents/InternshipRequest.pdf>
  
- During the first week of the internship:
  - Have internship site complete the *Learning Guide/Project Outline* (pages 2-3) and return to the Faculty Coordinator.
  - Complete other academic department requirements to establish internship.
  
- Complete the *Mid-Term Evaluation* (page 5) form and return it to your faculty/internship coordinator.
  
- At the end of the semester, complete the *Post-Work Evaluation Form* (pages 6-8) and return to Career Services Center (second floor of the West Library, room 202 or 203).

## **Faculty:**

- Advise student on departmental requirements to establish/set up internship and whether scheduling an interview at internship site is needed.

If the student is selected for an internship,

- Obtain a copy of the *Internship Application and Acknowledgement Form* (page 1) that is completed by the student.
- Obtain and review *Internship Site Request for Intern Placement* (pages 9-10) completed by the internship site.
- Advise Career Services Director of internship location, employer contact information, dates of internship period, student participating in internship, and faculty internship sponsor.
- Prepare syllabus and give to and review with student.
- Have student register for appropriate class with appropriate number of credit hours.
  - Student should use “Internship Request” form available on the Registrar’s webpage: <http://www.txwes.edu/registrar/documents/InternshipRequest.pdf>
- Ensure that internship site completes the *Learning Guide/Project Outline* (pages 2-3) and returns it to you (required).
- Visit work site at least once during semester (recommended).
- Have student complete the *Mid-Term Evaluation* (page 5) form and return it to you (optional).
- Have student complete any additional academic requirements according to syllabus.
- By the end of the semester, ensure that the student completes the *Student Post-Work Evaluation Form* (pages 6-8) and returns it to Career Services (required).
- Have internship site complete *Site Evaluation of Intern Form* (pages 11-12) or similar document and return to you (optional).

## **Internship Site:**

- Complete *Internship Site Request for Intern Placement Form* (pages 9-10).
- Complete *Learning Guide/Project Outline* (pages 2-3) and sign *Internship Contract Form* (page 4) that student also signs. Return these to the student.
- At the end of the semester, complete the *Site Evaluation of Intern Form* (pages 11-12) and return to faculty coordinator.



Texas Wesleyan University  
**Internship Application and Acknowledgment Form**

Student Name \_\_\_\_\_ Student Email \_\_\_\_\_

Home Phone \_\_\_\_\_ Major \_\_\_\_\_

Where would you like to be placed? \_\_\_\_\_

Which semester do you plan to participate? \_\_\_\_\_

**Acknowledgment of Responsibilities**

1. I acknowledge and understand my responsibilities as a student participating in the Internship program as outlined in the *Student Bulletin for Internships*.
2. I understand that it is my responsibility to meet the requirements as established by my academic department coordinator.
3. I will be responsible for completing all of my work assignments and obligations by their respective deadlines.
4. I understand that, upon completion of my experience, I will complete a *Post Work Evaluation* and return it promptly to Career Services.
5. I will adhere to all program regulations and requirements as a student enrolled at Texas Wesleyan University.
6. I will report to work on time and, in the event of illness or emergency, will notify my intern site supervisor(s) promptly.
7. I will report to my academic department coordinator **at once**, any situation which would be detrimental.
8. If, for any reason during this assignment, I am removed from my position, *I will not apply for unemployment benefits*. I understand that this program is an academic program, not an employment program.
9. My signature below indicates my understanding of and adherence to the above requirements.
10. No life credit for internship will be granted at Texas Wesleyan University.

*In consideration for being allowed to participate in the internship program, I do hereby release and discharge all employees of Texas Wesleyan University from any and all liabilities, causes of action, costs, charges, claims, expenses, and demands, as well as from damages incurred by me as a result of my participation in the Internship Program.*

*By signing below, I hereby expressly assume any and all risks which may be incumbent with my internship.*

*Additionally, I hereby expressly agree forever to refrain from suit or proceeding at law against Texas Wesleyan University and Internship site for any personal injury or property damage incurred because of my participation in the Internship Program,*

*I have read, understood, and agreed to the terms herein.*

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date



LEARNING GUIDE/PROJECT OUTLINE

This internship agreement is only valid for \_\_\_\_\_, year \_\_\_\_\_
Internship course number \_\_\_\_\_ Credits to be earned \_\_\_\_\_

Student

Name: \_\_\_\_\_ Major: \_\_\_\_\_

Course title: \_\_\_\_\_ Faculty supervisor: \_\_\_\_\_

Email address: \_\_\_\_\_ Major: \_\_\_\_\_

Describe your learning goals during this internship: \_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_

Internship Site

Internship site: \_\_\_\_\_

Internship address: \_\_\_\_\_
Street city state zip

Internship site supervisor: \_\_\_\_\_ Supervisor's title \_\_\_\_\_

Phone #: \_\_\_\_\_ Supervisor's email address: \_\_\_\_\_

Start date: \_\_\_\_\_ Completion date: \_\_\_\_\_ Hours per week: \_\_\_\_\_

Internship location/department: \_\_\_\_\_ Student wages: \_\_\_\_\_
(Per hour/week/semester)

1. Duties and responsibilities of this work assignment (or attach job description): \_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_

Wesleyan Faculty Internship Coordinator

Faculty supervisor: \_\_\_\_\_ Department: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email address: \_\_\_\_\_

Indicate the following academic requirements that must be completed:
\_\_\_ Completion of workbook \_\_\_ Term paper \_\_\_ Oral presentation \_\_\_ Maintain journal
\_\_\_ Other (please describe) \_\_\_\_\_
\_\_\_\_\_

2. General objectives of this assignment (or attach description of internship objectives): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

3. Specific requirements of this student: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Signatures**

Student Intern: I accept the responsibilities as stated on this agreement. I agree to complete all work assignments promptly and to the best of my ability. I agree to familiarize myself with and adhere to the relevant organizational policies, procedures, functions, and standards of ethical conduct.

\_\_\_\_\_ Date

Wesleyan Faculty/Internship Coordinator: I have discussed the internship and this Learning Agreement with the student. I agree to make myself available to talk with the student and/or supervisor about the internship experience, and to conduct an on-site visit and/or conference call with the student and supervisor.

\_\_\_\_\_ Date

Internship Site Supervisor: I have discussed the internship and this Learning Agreement with the student. I agree to provide the student with an orientation concerning the organizational policies, procedures, functions, and standards of ethical conduct as well as meet regularly with the student. I agree to conduct an evaluation of the student and to participate in a site visit and/or conference call with the student and Wesleyan's Faculty/Internship Coordinator.

\_\_\_\_\_ Date



**Texas Wesleyan**  
UNIVERSITY

**Internship Contract**

Internship Site: \_\_\_\_\_

In consideration for being allowed to participate in the internship program, I do hereby release and discharge all employees of Texas Wesleyan University from any and all liabilities, causes of action, costs, charges, claims, expenses, and demands, as well as from damages incurred by me as a result of my participation in the Internship Program.

By signing below, I hereby expressly assume any and all risks which may be incumbent with my internship.

Additionally, I hereby expressly agree forever to refrain from suit or proceeding at law against Texas Wesleyan University and Internship site for any personal injury or property damage incurred because of my participation in the Internship Program,

I have read, understood, and agreed to the terms herein.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Coordinator of the Internship Program

\_\_\_\_\_  
Date



**STUDENT MID-SEMESTER EVALUATION**

Semester: \_\_\_\_\_ Dates: \_\_\_\_\_

Name: \_\_\_\_\_ Major: \_\_\_\_\_

Course: \_\_\_\_\_ Credit Hours: \_\_\_\_\_ Faculty Coordinator: \_\_\_\_\_

Internship Site: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Phone #: \_\_\_\_\_

\*\*\*\*\*

1. Are your work responsibilities similar to those outlined on you Learning Guide? If not, please explain.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Is this experience contributing to your understanding of your major? How?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. In general, what are your observations about this experience?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Any problems of which we need to be aware?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Student

\_\_\_\_\_  
Date



**STUDENT POST-WORK EVALUATION**

Name: \_\_\_\_\_ Internship Site: \_\_\_\_\_  
(Please Print) Agency

Major: \_\_\_\_\_ Course: \_\_\_\_\_

Faculty advisor: \_\_\_\_\_ Term: \_\_\_\_\_  
Course Coordinator

1. Indicate your overall impression of your intern site supervisor:

Strengths: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Weaknesses: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. How has participation in this experience benefited you?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Please rate your experience by checking the appropriate box: As a result of this internship, my...

	Strongly Agree	Agree	Disagree	Strongly Disagree	Not Applicable
problem solving skills increased					
ability to creatively manage tasks increased					
academic knowledge and skills increased					
classroom learning was enhanced					
appearance and attitude became more professional					
networking skills increased					
focus on career development increased					



4. How could this experience be improved?

---



---



---



---

5. In your opinion, how well did your supervisor (co-workers) interact with you on the following scales?

		Poor	Marginal	Average	Good	Excellent	
Interpersonal relations	Not well accepted						Very cooperative
Adequate directions	Slow						Careful/complete
Variety of training opportunities	Very few						Many/varied
Expected assignments vs. actual assignments	Expectations were not met						Assignments were more than my expectations
Amount of supervision	Little contact						Generally available
Overall satisfaction with experience	Unsatisfactory						Outstanding

6. Total Semester Earnings (if applicable): \$ \_\_\_\_\_

7. Following the internship were you offered continued employment? \_\_\_yes \_\_\_no

If yes, did you accept? \_\_\_yes \_\_\_no

8. How did you find your internship?

\_\_\_ Faculty                      \_\_\_ Career Services      \_\_\_ Self-initiated contact  
 \_\_\_ Friend/Relative              \_\_\_ Interned with current employer      \_\_\_ Other

9. Please list job responsibilities and tasks. \_\_\_\_\_

---



---

10. Would you recommend this internship to another student? (Why or why not?) \_\_\_\_\_

---



---

11. Regarding you supervisor, he or she served as a professional role model. \_\_\_yes \_\_\_no

12. Supervisor's contact information: Name: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

13. Regarding your Wesleyan/faculty supervisor, please respond to the following

	Strongly Agree	Agree	Disagree	Strongly Disagree	Not Applicable
Helpful in explaining internship process and requirements					
Available and easily accessible					
Assisted in placement efforts					
Maintained professional demeanor					
Provided support during the internship					

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date



**Texas Wesleyan**  
UNIVERSITY

**INTERNSHIP SITE REQUEST FOR INTERN PLACEMENT**

DATE: \_\_\_\_\_

COMPANY/AGENCY: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PHONE #: \_\_\_\_\_

CONTACT NAME: \_\_\_\_\_

DEPARTMENT: \_\_\_\_\_

I. Proposed duties and responsibilities of student while on work assignment:  
(Attach additional sheet(s) if desired or attach a job description).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

|

II. Learning objectives of work assignment:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

---

III. Academic or special skills required of student:

---

---

---

---

---

IV. Wage or stipend available (if applicable): \_\_\_\_\_

V. Number of hours required per week: \_\_\_\_\_

VI. Preferred major/GPA of student: \_\_\_\_\_

Please forward completed request by email, fax, or U.S. mail to:  
Texas Wesleyan University  
Career Services  
1201 Wesleyan Street, Fort Worth, TX 76105  
Fax/Phone (817) 531-4980  
careerservices@txwes.edu



SITE EVALUATION OF INTERN

Semester: \_\_\_\_\_ Dates: \_\_\_\_\_

Name: \_\_\_\_\_ Major: \_\_\_\_\_

Course: \_\_\_\_\_ Credit Hours: \_\_\_\_\_ Coordinator: \_\_\_\_\_

Internship Site: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone #: \_\_\_\_\_

ACADEMIC EVALUATION: Please circle the appropriate response

Table with 6 columns: Item, Strongly Agree, Agree, Disagree, Strongly Disagree, NA. Rows include 'The student was well-prepared for this experience:' and sub-items a-d regarding academic training, preparation, and communication skills.

If this student was available for hire and if you had an opening would you hire him/her? Yes \_\_\_ No \_\_\_

Briefly relate the student's strong and/or weak work habits: \_\_\_\_\_

Would you make any recommendation that would help to prepare this student for his/her chosen career?

**PERFORMANCE EVALUATION:**  
Please check appropriate responses.

	Strongly Agree	Agree	Disagree	Strongly Disagree	NA
Interested and industrious	1	2	3	4	5
Learns work exceptionally well	1	2	3	4	5
Works well with others	1	2	3	4	5
Proceeds with little or no supervision	1	2	3	4	5
Quantity of work exceptional	1	2	3	4	5
Quality of work is excellent	1	2	3	4	5
Attendance is exceptional	1	2	3	4	5
Punctuality is exceptional	1	2	3	4	5
Reliability is exceptional	1	2	3	4	5
Professional image and appearance	1	2	3	4	5
Courteous and responsive	1	2	3	4	5
Ethical	1	2	3	4	5
Self-confident and decisive	1	2	3	4	5
Accepts advice and improves weaknesses	1	2	3	4	5

Please add any additional comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
 Student Signature Date

\_\_\_\_\_  
 Supervisor Signature Date

Please forward completed survey by email, fax, or U.S. mail to:  
 Texas Wesleyan University  
 Career Services  
 1201 Wesleyan Street, Fort Worth, TX 76105  
 Fax/Phone (817) 531-4980  
 careerservices@txwes.edu