# Table of Contents

I. OVERVIEW OF SUPERVISED INTERNSHIP

II. GUIDELINES AND PROCEDURE

III. ROLES AND RESPONSIBILITIES

IV. LEARNING AGREEMENT: Documentation of Learning

V. LEARNING AGREEMENT AND SUPPLEMENTAL FORMS

   Internship Learning Agreement

   Rights and Responsibilities Form

   Personal Property Form

   Background Release and Acknowledgement Form

   Student Evaluation of Internship Site Form

   Internship Site Student Evaluation Form

   pg. 3

   pg. 3

   pg. 5

   pg. 8

   pg. 9

   pg. 11

   pg. 13

   pg. 14

   pg. 15

   pg. 16

   pg. 17
I. OVERVIEW OF THE SUPERVISED INTERNSHIP

Junior- and Senior-status students enrolled in the Department of Allied Health Sciences (AHS) at the University of Connecticut may enroll in an academic internship. Internships are suggested but optional for completion of the AHS major. Internships are a 3-way cooperative venture among an employer (Internship Site Supervisor), a faculty member (UConn instructor/faculty advisor- Supervised Internship Instructor), and a student. This experience-based course places students in an organization under the guidance and supervision of both a qualified professional in an organization (agency, business, NGO, University Center or laboratory) and an appointed faculty member from the AHS department to gain hands-on experience that helps the student to:

- Connect and apply academic learning to real-world environments
- Confirm career choice
- Identify the type of organization and/or work environment he/she may wish to work in
- Develop professionalism, communication and team-building skills

AHS students may participate in academic internships during the summer or while they carry a full- or part-time student course load. The fee associated with earning credit for academic internships is included in the student’s regular semester tuition. Fees for internship credit taken during the summer will be under the summer tuition structure (fees vary by the number of credits). Course credit will be awarded by the AHS Supervised Internship Instructor based on the recommendation of the internship site supervisor, the grading criteria outlined in the Learning Agreement, and the learning product(s) submitted by the student.

This document outlines the specific details of the internship experience and is intended to give the student and internship site an understanding of the obligations and expectations of the experience.

II. GUIDELINES AND PROCEDURE: Student must follow the guidelines and requirements found herein.

1. Ensure you have Junior or Senior standing in AHS prior to the start date of the internship.
2. Identify a potential internship. This usually requires persistence, enthusiasm, and knowledge about what you want. Develop a resume to include in your inquiries. Speak with your faculty advisor, search the internet, and consult potential employers, Centers and institutes within the University, etc. for ideas. Some employers offering seasonal or part-time jobs might also be interested in participating in an internship. It is up to the student to make the inquiries to ascertain whether the employer is willing and able to participate. AHS faculty are not responsible to identify or ensure an internship experience. Students must also identify an Internship site supervisor to oversee the student and experience. This person cannot be a relative, direct report to a relative, supervisor of a relative or in a position that would create a conflict of interest.
3. The internship must be at least 10 weeks in length during the fall or spring semester, and at least 8 weeks during the summer session. The scale for hours to credits is below. Credits may vary if the internship is shorter or longer than the standard 14 week duration.

<table>
<thead>
<tr>
<th>Time</th>
<th>Hours</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>45-60 hours</td>
<td>3-4 hr/wk X 14 wks</td>
<td>1 credit</td>
</tr>
<tr>
<td>61-120 hours</td>
<td>6-8 hr/wk X 14 wks</td>
<td>2 credits</td>
</tr>
<tr>
<td>120+ hours</td>
<td>&gt;9 hr/wk X 14 wks</td>
<td>3 credits</td>
</tr>
</tbody>
</table>
4. This course may be repeated provided that the sum total does not exceed six credits.
5. Apply for the job or internship position. The student must make clear to the internship site supervisor/employer their intent to have an internship and the responsibilities of both the student and the internship site supervisor/employer.
6. Identify an AHS faculty member who will be willing to work with you and perform the role of the Supervised Internship Instructor. Any member of the AHS faculty can serve as the Supervised Internship Instructor. Ideally the faculty instructor is appropriate to the internship topic.
7. Develop the Learning Agreement. The student takes the lead in the development of the Learning Agreement with guidance from the internship site supervisor. Learning Agreements should be submitted to the supervised internship instructor for initial approval. Please note the following with respect to approval:
   - Internship requests within one month of the start date or once the academic semester begins will not be approved except under extenuating circumstances.
   - Internship credit will not be approved retroactively nor for previous experience.
   - Internship credits will not be approved for internships abroad unless it is a component of an academic course. In this instance, credit is given for the course, not the internship.

The function of the Learning Agreement is to establish a binding agreement among the student, the internship site supervisor, and the supervised internship instructor on the purposes and logistics of the student’s internship. The Learning Agreement will provide as much detail as possible about the a) student’s role and responsibilities in the internship (learning activities) b) supervision at the internship site c) learning objectives d) criteria for grading/evaluation of the student and e) work products. Students complete the Learning Agreement with the internship site supervisor and bring it to the supervised internship instructor for consideration and approval. The Agreement must be finalized and signed by all three parties before it can be approved by the Department Head. Department Head approval is required prior to the registration and start of the internship.
8. Provide signed copies of the following forms along with the Learning Agreement to the supervised internship instructor.
   a. Rights and Responsibilities Form
   b. Personal Property Waiver Form
   c. Criminal Background Release and Acknowledgement Form
   d. Independent Study Authorization Form (on Registrar website)
9. Provide documentation of liability insurance (from the University, internship site, or personal)
10. Enroll in AH 3091 (Allied Health Sciences Internship).
11. Perform the internship. Be sure to make progress on your learning product(s).
12. To complete internship, submit the internship site evaluation form two-weeks prior to the completion of the internship. At the conclusion of the internship submit all learning product(s) to the supervised internship instructor.
13. A final grade of S (satisfactory) or U (unsatisfactory) will be assigned to students in AH 3091 by the supervised internship instructor and will be based on the grading/evaluation criteria outlined in the Learning Agreement and evaluation from the internship site supervisor.

**Student Procedure Checklist for Approval**
- Ensure junior/senior standing
- Identify potential internship site
- Identify Internship Site Supervisor (may not be a relative… etc)
- Identify faculty member to serve as Supervised Internship Instructor
- Complete Learning Agreement
- Obtain signature of all parties on the Learning Agreement
- Provide a signed copy of all supplemental forms
- Obtain Liability Insurance
- Enroll in AH 3091
III. ROLES AND RESPONSIBILITIES

A. Internship Site Supervisor Responsibilities
The Internship Site Supervisor is an employee or other designee from the internship site (not a relative or in a position to create a conflict of interest) responsible for monitoring and evaluating the student's internship experience.

The Internship Site Supervisor:
1. Agrees to accept the student for an internship.
2. Assists the student in the development of a Learning Agreement. The function of the Learning Agreement is to establish an agreement among the student, the internship site supervisor, and the supervised internship instructor on the purposes and logistics of the student's internship. The Learning Agreement will provide as much detail as possible about the a) student’s role and responsibilities in the internship (learning activities) b) supervision at the internship site c) learning objectives d) criteria for grading/evaluation of the student and e) work products. Complete the Learning Agreement with the internship site supervisor and bring it to the supervised internship instructor for consideration and approval. The Agreement must be finalized and signed by all three parties before submitting the Agreement to the Department Head for approval. Department Head approval is required prior to the registration and start of the internship.
3. Internship sites may provide the student with a stipend only to help support the student during the internship, not for service work related to the educational objectives of the internship or with the agreement of required employment after completion of the internship.
4. Orient the student to the internship site’s policies and procedures, including essential observational, movement (physical), communication, and/or other requirements of the internship site.
5. Assign and supervise the student's internship activities. Provide onsite supervision. The coordinator may designate a supervisor to ensure the student has the opportunity to meet the educational objectives in the Learning Agreement.
6. Monitor the student's progress toward completion of the educational objectives during the internship.
7. Complete an Internship Site Student Evaluation Form and submit to the supervised internship instructor.

B. Supervised Internship Instructor Responsibilities
The Supervised Internship Instructor is a faculty member in the Department of Allied Health Sciences at the University of CT Storrs campus and has the responsibility of advising the student regarding University internship policies, coordinating the internship in collaboration with the student and the internship site, and completing the final evaluation and grading.

The Supervised Internship Instructor:
1. Assists student with the development of the Learning Agreement.
2. Evaluates educational objectives and outcomes for the internship to be consistent with the learning objectives for the major, reviews and approves the Learning Agreement.
3. Oversees student internship rotations in conjunction with the internship site supervisor.
4. Evaluates completion of educational objectives and outcomes and records student performance in conjunction with the internship site supervisor.
5. Assigns a grade of Satisfactory (S) or Unsatisfactory (U) and submits the student evaluation to the official offices of records.

C. Student Responsibilities
The internship is a practical setting beneficial to allied health education. It is in this setting that students learn to apply the skills learned in the classroom. The departments, institutions and practitioners in these settings are donating their time to your education. When you are in these settings, you are a "privileged associate." You must remember that you are expected to be a part of the institution with its unique policies and procedures.
Professionalism

Students should strive to establish a good working relationship with all personnel that they come in contact with during their internship. Students may be asked to complete tasks they would rather not do and/or encounter personality conflicts. These may occur at a site just as they do in all aspects of life. While on the internship, however, it is expected that the student will put aside personal differences and work collegially with other personnel. Students should consult with the appropriate personnel anytime a question about proper protocol or procedure arises. If unsure of what the correct course of action is, it is the student’s responsibility to determine proper protocol and proceed accordingly. Depending upon the situation, consultation with the site procedure manual, staff, the supervisor, or others may be appropriate. Students must develop and demonstrate the ability to determine which types of circumstances are best answered by each of the above. Conflicts not able to be resolved at the internship site should be reported to the supervised internship instructor.

Dependability, Initiative, Accountability and Communication

The site supervisor and others in the organization depend on interns to assist the organization in its mission. Students are expected to take the initiative to have a working understanding of the organization and to engage in activities to optimize the learning experience. Students are expected to work as a member of the team by completing assignments of quality in accordance with the Learning Agreement by the assigned deadline dates. Students should stay busy, ask questions, and seek out new learning opportunities. Don’t wait to be asked to do something! Students should keep the Internship Site Supervisor and Supervised Internship Instructor informed of their progress on a regular basis. Seek out feedback on performance and discuss issues of concern in a timely and professional manner with the Internship Site Supervisor and/or internship instructor. Talk honestly and professionally with the internship site supervisor if difficulties are experienced.

Confidentiality

Students on internships may be exposed to or work with patient, confidential or proprietary information. Therefore, students have a moral, ethical and legal responsibility to maintain the confidential nature of this information. All information is the property of the internship site and students may be required to sign documents regarding confidentiality and proprietary information. Any unauthorized release of confidential information by any student to unauthorized personnel will be grounds for immediate dismissal from the internship. Additional disciplinary action may apply depending on the nature of the violation (i.e. failure of the course, University or other disciplinary action).

Attendance

Students are expected to be in attendance during regularly assigned times. Departments run on very tight schedules. You will be expected to be ON TIME and ready for your day. Students are expected to inform the Facility Coordinator and/or assigned internship site supervisor in the event of an absence. Because the internship is designed to simulate a work experience under professional guidance, the student must demonstrate professional behavior by notifying the appropriate person(s) as early in the day as possible. Students with excessive tardiness or absence may be asked to leave the internship and/or receive a U for the AH 3091 course.

Length of the Internship, Hours

The total length of the internship and hours required are outlined in the learning Agreement. The Internship Site Supervisor and the Supervised Internship Instructor must approve any variance from the learning Agreement. The internship must be at least 10 weeks in length during the fall or spring semester, and at least 8 weeks during the summer session. The scale for hours to credits: each 1 credit is an increment of 45-50 hours.
Students are expected to comply with the policies of the internship site with regard to dress.

**Stipends**

Stipends paid to the student by the internship site are expressly to help support the student during the internship semester. They are not to be given in exchange for service work related to the educational objectives of the internship experience or with the agreement of required employment in the site after completion of the internship. Service work by students at the internship outside of regular academic hours must be noncompulsory, paid, supervised on-site and subject to the employee regulations of that site.

**Harassment**

It is expected that all students be treated equitably within the internship setting. The University of Connecticut does not condone harassment by or directed toward any person or group within its community – students, employees, and visitors. You must treat all co-workers, including other interns, clients, vendors, and others encountered on the internship politely and professionally. Alert your internship site supervisor if you are subjected to or observe such behavior.

**Personal Accommodations**

Inform your internship site supervisor of the accommodations you might need to successfully complete your work assignments. Internship site supervisors must provide reasonable, but not the exact, accommodations requested. Students must be aware of and meet the essential observational, movement (physical) and communication requirements of the internship site.

**Fees and Expenses**

The student is responsible for payment to the University the usual tuition and fees as paid by all University students even when participating in an off-campus internship. Additionally, the internship requires an added expense of malpractice insurance (see below). Students who withdraw from the course (voluntarily or otherwise) are not entitled to a refund of this fee. The student is responsible for his/her own transportation to the internship site. The student should allow for transportation expenses, which could include cost of gasoline, parking fees & cost of air travel/bus/train where necessary. The student is also liable for his/her safety in travel to or from assigned areas. The University of Connecticut and the Department of Allied Health Sciences are not responsible for identification, liability for or payment of room and board while on an internship experience. Students assume all responsibility with respect to fees associated with engaging in an internship experience.

**Professional Liability Coverage (malpractice insurance).**

1. All students enrolled in AH 3091: supervised internship are required to carry specific professional liability coverage under the blanket University policy.
2. Students are billed automatically for this on their University fee bill.
3. Although the State of Connecticut has statutory protection for students in "field placement programs" (Chapter 53 of the Connecticut General Statutes), there are several agencies that will not accept this as adequate protection. Therefore, the Department of Allied Health Sciences, on advice of counsel, has required that all students have the blanket University malpractice coverage.
IV. LEARNING AGREEMENT: Documentation of Learning

Documentation of learning may be done in a variety of ways and should specifically be outlined in the Learning Agreement. The function of the Learning Agreement is to establish an agreement among the student, the internship site supervisor, and the supervised internship instructor (University of Connecticut faculty member) on the purposes and logistics of the student's internship. Each should keep a copy, and the original must be submitted to the main office for filing in the student folder.

The Learning Agreement will provide as much detail as possible about the
1. student’s role and responsibilities in the internship (learning activities)
2. supervision at the internship site
3. learning objectives
4. criteria for grading/evaluation of the student
5. work products required

The following are typical methods used to evaluate student learning through an internship:

1. Reflective journal. Students, either on a daily or weekly basis, enter a summary of their work and overall experience for the recent period. It is recommended that students follow a regular format including date, activity, work performed, what they learned, and how this helped them develop personal and/or professional skills.

2. Progress reports. At regular intervals, weekly, bi-weekly or midterm, students provide the faculty internship coordinator with a progress report of their experience and how they are moving toward the achievement of their objectives. Often this is done by e-mail.

3. Product samples. If the student was engaged in an experience where a product of any kind was involved, a sample of that product is provided to both the site supervisor and the supervised internship instructor with a thorough explanation of the student’s involvement in the creation/development, etc., of that product.

4. Final report. A scholarly written report of the achievement of their learning objectives. The format of the report is determined in conference with the supervised internship instructor.

5. Presentation. When public speaking and presentations are commonly part of the career field, often a public presentation is required as part of the grading criteria. The student and supervised internship instructor should discuss the format and venue of the presentation.

6. Publication. Occasionally, a student is involved in a project that warrants professional publication. The supervised internship instructor may assist the student in the presentation of their work for submission to a professional journal or other periodical. The process of preparing for a professional publication is part of the learning experience and worthy of grading consideration.

8. Employer evaluation. This employer feedback is a mandatory part of the grading criteria the sponsoring supervised internship instructor employs in determining the course pass or fail grade.
V. LEARNING AGREEMENT AND SUPPLEMENTAL FORMS

A. Learning Agreement
All students enrolled in a supervised internship experience must complete and have approved a Learning Agreement. The Learning Agreement will provide as much detail as possible about the a) student’s role and responsibilities in the internship (learning activities) b) supervision at the internship site c) learning objectives d) criteria for grading/evaluation of the student and e) work products. Complete the Learning Agreement with the internship site supervisor and bring it to the supervised internship instructor for consideration and approval. The Agreement must be finalized and signed by all three parties before submitting the Agreement to the Department Head for approval. Department Head approval is required prior to the registration and start of the internship.

B. Rights and Responsibilities Form
The Rights and Responsibilities Form acknowledges that the student received a copy of the Supervised Internship: AH 3091 Guidebook, understands his/her responsibility as it relates to information in the guidebook, had an opportunity to review and ask questions regarding the contents of the Guidebook and the requirements of the Supervised Internship, and that the student accepts participation in the Supervised Internship and will abide by to the policies and requirements as outlined in the Guidebook.

C. Background Check Release andAcknowledgement Form
The Background Check Release and Acknowledgement Form states that the student is aware that a criminal background check and/or other background check may be required for a particular internship.
- Background checks may be required prior to placement in an internship as deemed appropriate by the internship site. In certain circumstances evidence of a criminal record or other infraction may prevent a student from completing an internship.
- Students assume responsibility of payment, completion of the background checks, and to ensure submission of required documentation to the internship site.
- Students will submit confirmation of background check (NOT the report) to the Supervised Internship Instructor if required.
- To review student rights under the Fair Credit Reporting Act, access: www.ftc.gov/credit.
- Students have the right to review the information reported by the criminal background check company for accuracy and completeness and to request that the designated company verify the background information provided is correct. Students may be provided with a copy of or access to the criminal background check report issued by the designated company in accordance with their policies and procedures. The Department of Allied Health Sciences, CAHNRI, and the University do not have access to this information.

D. Property Waiver: Personal Property Waiver Form
All students enrolled in AH 3091: Supervised Internship are required to complete a Personal Property Waiver Form, which indicates that the internship site, the Department of Allied Health Sciences, College of Agriculture, Health and Natural Resources, and the University of Connecticut are not responsible for loss, damage, and/or theft to a student’s personal property while engaging in an internship experience.

E. Independent Study Authorization Form
All students enrolled in AH 3091: Supervised Internship are required to complete the Independent Study Authorization form. This form is needed in order for the registrar’s office to assign the correct number of credits and to provide an internship title on your transcript. Students should NOT be registering without this form (i.e. using a permission #). Doing so will not allow you to have your internship title listed on your transcript.
F. Other Requirements:
Internship sites may have other requirements (additional to those required by the Department of Allied Health Sciences) regarding participation in the internship (e.g. Physical examination, etc.). In this instance, students bear the responsibility to comply with all required documentation. Completion of requirements is between the student and the internship site; The Department of Allied Health Sciences and the University of Connecticut hold no liability or responsibility to assist the student in completion of these requirements.
University of Connecticut
Department of Allied Health Sciences

Internship Learning Agreement

Part I: To be completed by student and student’s faculty advisor: The student assumes the responsibility to coordinate and ensure this Agreement is complete prior to submitting it to the Supervised Internship Instructor and the Department Head.

Student Name: ___________________________ Student ID: ___________________________

Address: _______________________________________________________________________

Student phone: ________________________ Student email address: _______________________

Program: __________________ Concentration (if applicable): __________________

Credit standing: __________ Faculty Advisor: __________________

My signature verifies that I am capable of and committed to participation in the internship as described below. I also agree to abide by the policies and procedures as outlined to me both as a University of Connecticut student and as an intern at the Internship Institution. I understand that failure (including but not exclusive) to meet objectives, effective requirements, institution requirements or attendance policies may result in an unsatisfactory grade for this internship.

Student Signature ___________________________ Date __________

Faculty Advisor Signature ___________________________ Date __________

I verify that the internship experience described below is consistent with program objectives and pending successful (S) completion can be included in the student’s plan of study.

Part II: To be completed by the Institution offering the Internship: The internship site assumes responsibility to arrange hours and assumes responsibility to ensure that the student is in compliance/meets institution guidelines and adheres to policies for participation. The site supervisor is also responsible for the evaluation of the learning objectives.

Name of Institution: __________________________________________

Address: _______________________________________________________________________

Internship Site Supervisor: __________________________________________

(This is the person who will assume responsibility for supervising and evaluating the student)

Position at the institution: __________________________________________

Supervisor Phone: ___________________________

Supervisor Email: __________________________________________
Part II: To be completed by the Institution offering the Internship: (cont.)

Title of the internship: ____________________________________________________________

Description of Internship (duties/responsibilities): __________________________________

Dates of participation (hourly, weekly): _____________________________________________

Total hours for internship: ________________________________________________________

<table>
<thead>
<tr>
<th>Time</th>
<th>Hours</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>45-60 hours</td>
<td>3-4 hr/wk X 14 wks</td>
<td>1 credit</td>
</tr>
<tr>
<td>61-120 hours</td>
<td>6-9 hr/wk X 14 wks</td>
<td>2 credits</td>
</tr>
<tr>
<td>120+ hours</td>
<td>&gt;9 hr/wk X 14 wks</td>
<td>3 credits</td>
</tr>
</tbody>
</table>

In addition to the **required objectives listed below**, please **attach a separate explanation of specific learning objectives:**

<table>
<thead>
<tr>
<th>Learning Objectives (What will the student learn?)</th>
<th>Activities (How will the objective be accomplished?)</th>
<th>Evaluation (How will the student know the objective is met?)</th>
</tr>
</thead>
<tbody>
<tr>
<td>The student will demonstrate synthesis and analysis of internship experience</td>
<td>Keep reflective journal on thoughts, feelings, experiences, and activities to report achievement of learning objectives</td>
<td>Complete a 2-3 page final self-evaluation/reflective paper on internship experience</td>
</tr>
<tr>
<td>The student will demonstrate appropriate affective behaviors</td>
<td>Perform the internship while meeting the objectives outlined in the internship site student evaluation form</td>
<td>Internship site supervisor will complete the <strong>student evaluation form</strong> at the completion of the internship, or whenever needed.</td>
</tr>
</tbody>
</table>

Internship Site Supervisor Signature __________________________ Date ____________

My signature verifies that I am an authorized staff person at the above named institution to provide this internship. I acknowledge that the institution has the authorization, personnel and resources to offer this internship. The institution has reviewed the qualifications for this student’s participation in this internship and deemed them appropriate. The internship site also assumes responsibility and liability for the student and/or others as a result of direct participation in activities associated with the objectives of this internship and releases the University of Connecticut and the Department of Allied Health Sciences from liability with respect to this student’s participation in this internship.

Part III: To be completed by Supervised Internship Instructor: Submit after Parts I and II have been completed and signed.

**Supervised Internship Instructor (print name):** ______________________________________

**Supervised Internship Instructor phone:** __________________________ **email:** ________________

**Course Catalog number:** AH 3091* **Section number:** _______ **Credit hours:** (variable 1-6 credits): _______

**Semester:** __________________________ **Grading:** Grading of this course is S/U only

*Students may count up to 6 credits of combined Internship, International Study and Independent Study course work toward the major.

Supervised Internship Instructor Signature __________________________ Date ____________

My signature verifies that I assume responsibility to oversee the academic components (academic integrity, grade submission, etc.) of this internship. I also deem this internship appropriate for this student to be included in the plan of study pending successful completion.

Part IV: To be completed by Department Head. Submit after Parts I, II, and III have been completed and signed.

**Department Head Signature** __________________________ **Date** ____________

My signature verifies that this internship meets the guidelines of this department as it relates to academic integrity and student participation in an internship and that this internship is appropriate for this student to be included in the plan of study pending successful completion.
Rights and Responsibilities Form

Name of Student: __________________________________________

(Print Name)

Student ID #: __________________ Internship Semester: _________________

By signing this form, I am accepting the statements indicated below:

1) I acknowledge that participation in a supervised internship experience is not mandatory for completion of the Allied Health Sciences major.

2) I acknowledge that the College of Agriculture, Health and Natural Resources, the Department of Allied Health Sciences, and participating faculty assume no responsibility as it relates to my personal being and that I assume full responsibility for participation in a supervised internship.

3) I acknowledge that I have received a copy of the Supervised Internship: AH 3091 Guidebook.

4) I understand that it is my responsibility to read the policies and requirements as stated in this Guidebook.

5) I have had an opportunity to review and ask questions regarding the contents of the Guidebook and the requirements of the Supervised Internship.

6) I accept participation in the Supervised Internship and will abide by to the policies and requirements as outlined in the Guidebook.

______________________________________________________
Student Signature

______________________________________________________
Date

Please return this form along with the Internship Learning Agreement.
UNIVERSITY OF CONNECTICUT
DEPARTMENT OF ALLIED HEALTH SCIENCES
Supervised Internship: AH 3091

Personal Property Waiver Form

Name of Student: _________________________________________________________________
(Print Name)

Student ID #: __________________

Internship Semester: _______________________

My signature below signifies that I understand that during my participation in a supervised internship:

1) The College of Agriculture, Health, and Natural Resources, the Department of Allied Health Sciences, and participating faculty are not responsible for loss, damage or theft to my personal property while traveling to and from or during a supervised internship.

2) The designated facility or agency is not responsible for loss, damage or theft to my personal property.

3) If I bring any personal property to my supervised internship site, I understand that I assume all responsibility if it is lost, stolen, and/or damaged.

____________________________________________________   ______________
Student Signature                                           Date

Please return this form along with the Internship Learning Agreement.
UNIVERSITY OF CONNECTICUT
DEPARTMENT OF ALLIED HEALTH SCIENCES
Supervised Internship: AH 3091

Background Check Release and Acknowledgement Form

Name of Student: _________________________________________________________________
(PRINT NAME)

Student ID #: __________________ Internship Semester: __________________________

By signing this form, I am accepting the statements indicated below:

• I hereby acknowledge that I am electively enrolling in a supervised internship through
  the Department of Allied Health Sciences that requires placement in a Supervised
  Internship site.

• I hereby acknowledge and understand that I may be required to obtain a criminal
  background report and/or other background check (e.g. drug testing) by a company
  designated by the site and that I am responsible for all fees involved in obtaining such
  reports.

• I hereby acknowledge and understand that the results of my criminal background
  and/or other background reports will be submitted directly to the supervised internship site in
  connection with my participation in a supervised internship.

• I hereby acknowledge and understand that the results of the criminal background and/or
  other background reports may prevent me from being accepted to a supervised
  internship site. In the event this should happen, the Department of Allied Health Sciences
  is not responsible to find an alternative Supervised Internship Site.

• I hereby acknowledge and understand that my acceptance into a supervised internship
  site is determined solely by the supervised internship site and not by the program of
  study, Department of Allied Health Sciences, College of Agriculture, Health and Natural
  Resources, or the University. I also understand that the University is under no obligation
  to find a supervised internship site that will accept my placement notwithstanding a
  negative background report.

I hereby waive and release any and all manner of actions, cause of actions, and demand of
every kind, nature and description arising from my failure to complete a supervised internship
resulting from my inability to satisfy any of the requirements of the internship due to the results
of my criminal background and/or other background report.

__________________________________________________________
Student Signature

__________________________________________________________
Date

Please return this form along with the Internship Learning Agreement.
University of Connecticut
Department of Allied Health Sciences
AH 3091: Student Evaluation of Internship Site Form

Please complete this final evaluation form and send to the Supervised Internship Instructor 2-weeks before the internship end-date. Failure to submit this form within the time frame will result in an unsatisfactory grade for the internship.

10 = Outstanding  8 = Very Good  6 = Good  4 = Poor  2 = Unacceptable

Intern Name: ____________________________________  Internship Site: ______________________________

1. Mentorship/Supervision:
   10  8  6  4  2  Comment:

2. Career Related Tasks/Projects:
   10  8  6  4  2  Comment:

3. Opportunity for Learning:
   10  8  6  4  2  Comment:

4. Educational/Learning Agreement Goals Met:
   10  8  6  4  2  Comment:

5. Overall experience:
   10  8  6  4  2  Comment:

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Please answer the following questions

6. Overall, have your expectations of the internship been met?

7. What could have made the internship experience more beneficial to you (or to future students)?

8. What suggestions do you have for future interns at this site?

9. How has this internship impacted your educational and professional plans?

10. Additional comments

Student signature: ________________________________  Date: ______________
Department of Allied Health Sciences  
AH 3091: Internship Site Student Evaluation Form

Please use this form whenever needed. However this form must be completed and returned to the faculty instructor within 1-week of the internship end-date. The evaluation rating scale indicates the degree to which the student had exhibited the attribute under observation. Students assessed at less than 73 overall (total of all 10 objectives) or less than a 7.0 on any of the individual items may be subject to an unsatisfactory (U) grade for the internship.

½ Fractions between numbers on the scale may be used

10=Outstanding (consistently meets the objective)  
9=Very Good (usually meets the objective)  
8=Good (meets the objective most of the time)  
7= Poor (frequently does not meet the objective)  
6=Unacceptable (did not meet the objective)

Intern Name:  _____________________________  
Internship Site:  ___________________________________________

1. **Communication skills:** Demonstrated good communications with peers, supervisory personnel and other professionals.
   
   10  9  8  7  6  Comment:

2. **Interpersonal relations:** Exhibited good interpersonal relations when dealing with peers, supervisory personnel and other professionals.
   
   10  9  8  7  6  Comment:

3. **Initiative:** Completed assignments within established timeframes and sought guidance on what to do next when tasks were completed
   
   10  9  8  7  6  Comment:

4. **Self Reliance:** Developed the ability to work independently.
   
   10  9  8  7  6  Comment:

5. **Judgment:** Demonstrated good problem solving skills.
   
   10  9  8  7  6  Comment:

6. **Dependability:** Demonstrated reliability in executing responsibilities and assignments.
   
   10  9  8  7  6  Comment:

7. **Attendance:** Reported to work when assigned and was punctual.
   
   10  9  8  7  6  Comment:

8. **Attitude:** Exhibited enthusiasm for his/her work and accepted constructive criticism.
   
   10  9  8  7  6  Comment:

9. **Organizational ability:** Prioritized responsibilities, kept work area clean, neat and organized.
   
   10  9  8  7  6  Comment:

10. **Performance:** Demonstrated appropriate technique/methods as instructed, accurately recorded/reported findings, adhered to policies and procedures, achieved high standards.
   
   10  9  8  7  6  Comment:

**General Comments:**

**Total Score:** ________________

**Student Comments:**

______________________________  ________________  
Student Signature  ___________  Internship Site Supervisor  ___________

______________________________  ________________
Date  ___________  Date
Please answer the following questions (Does not need to be reviewed with student)

Overall, have your expectations of the student been met?

In what areas (if any) could the student improve?

If circumstances permitted, would you hire the student for a position with your facility?

Would you accept another student intern in the future?

Additional comments:

Final student evaluation: (please indicate satisfactory or unsatisfactory): ____________________________

Evaluator signature: ____________________________ Date completed: ____________