# CEL logo blackThe Piper Center for Vocation and Career, St. Olaf College

***Please refer to the following websites for details on the registration process, requirements, forms, and tips:*** *Domestic Academic Internships <http://wp.stolaf.edu/pipercenter/domestic-academic-internships/>*

*International Academic Internships* [*http://wp.stolaf.edu/pipercenter/international-academic-internships/*](http://wp.stolaf.edu/pipercenter/international-academic-internships/) *\** **Note that students who register for Interim and Summer internships are required to attend an in-person orientation.**

***\*\*Please complete this form electronically in Word (do not fill out by hand), save the file for your records, print the document (single sided), and obtain appropriate signatures.***

**STUDENT INFORMATION**

|  |  |  |  |
| --- | --- | --- | --- |
| Last Name: | | First Name: | MI: |
| Student ID: | | Class Year: |  |
| Email: | | Phone: |
| Major1: | Major2: | Concentration(s): |
| Are you an international student?       *(If yes, you need approval/signature from Megan Carmes in IOS)* | | |

**STUDENT LIVING ADDRESS DURING INTERNSHIP**

|  |  |  |  |
| --- | --- | --- | --- |
| Street: | City: | State: | Zip: |
| Country: |  |  |  |
| **Do you hope to travel to a country with a State Department Travel Warning?**        *<http://travel.state.gov/content/passports/english/alertswarnings.html>*  If yes, please email Nate Jacobi <jacobi> as soon as possible before the deadline to inquire about the process for applying for special permission to earn credit in this country. | | | |

**REGISTRATION INFORMATION**

*For more information please see Tips for Completing the Learning Agreement on the appropriate Piper Center website (listed above).*

|  |  |
| --- | --- |
| Internship Start Date: | Internship End Date: |
| ***Start and end dates should typically fall within the first and last day of classes for the term. If not, Term Date Letter is required.*** | |

Fall  Spring

Interim (1.0 credit only)  Summer (additional paperwork required)

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| --- |
| **Academic Department/Program:**       \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Faculty supervisor must approve the designation. Typically the same department/program as the faculty supervisor or “ID” for interdisciplinary.  **Credit:**  0.25 (65 hours)  0.5 (100 hours)  1.0 (160hours) **Level**:  294 (default)  394 |
| NOTE: Academic Internships are graded P/N |

**FACULTY SUPERVISOR**

|  |  |
| --- | --- |
| Last Name: | First Name: |
| Email: | Dept./Program: |

**INTERNSHIP INFORMATION**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Organization/Business:  Nonprofit For-Profit NGO Government | | | | |
| Street: | City: | | State: | Zip: |
| Country: | Phone: | |  | |
| Site Supervisor Last Name: | | Site Supervisor First Name: | | |
| Site Supervisor Title: | | | St. Olaf Alum? Y or N: | |
| Site Supervisor Email:        \*please double check that this is correct and legible | | | | |
| Student Internship Position/Title: | | | | |

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| **Hours/week**:  **NOTE:**  For 1.0 credit, on-site experience plus academic work must total a minimum of 160 hours (min. 120 doing the internship).  For 0.5 credit, on-site experience plus academic work must total a minimum of 100 hours (min. 80 doing the internship).  For 0.25 credit, on-site experience plus academic work must total a minimum of 65 hours (min. 55 doing the internship). |
| Check all that apply:  Not Paid  Hourly Rate $       Piper Center Internship Grant Award  Stipend        Piper Center Internship Program:  **Consent & Disclosure Form - Action Required** <https://wp.stolaf.edu/vetting/>Students who register for an academic internship (or any other St. Olaf sponsored off-campus experience) are required to complete a two-item online Consent & Disclosure Form (found at <https://wp.stolaf.edu/vetting/>) and select “Academic Internship Registration” as the program. Responses will be seen by staff in the Dean of Students Office and the Director of the Piper Center. If it is discovered that the applicant has a history of significant behavioral or academic issues that may affect his/her ability to participate in the program the Piper Center staff person managing the program may also be notified.   **Have you already completed the Consent & Disclosure Online Form?**  Yes   \*Please complete the form before you check “yes”  **Industry/Field** Please select one or two industries from the following list.  Arts Management  Healthcare & Medicine  Nonprofit & Social Services  Business  Legal Professions  Sales & Marketing  Education  Media & Communications  Science & Lab Research  Entrepreneurship  Ministry & Religiously Affiliate  Sports Management & Recreation  Environmental  Museum/Historical Preservation  Technology  Government & Public Policy  Music, Theater, Dance & Performing Arts  **Internship Duties & Responsibilities:**  *(Cut and paste or attach position description provided by organization, or provide a list of primary duties/projects/tasks.)*  *NOTE:* [IRB](http://www.stolaf.edu/academics/irb/) review required if your internship involves research-related work with human subjects. |
|  |

**STUDENT:** Complete a draft of the **Learning Goals & Strategies** PRIOR to meeting with your faculty and site supervisors to review/finalize. Contact your supervisors well in advance of the deadline, and schedule a meeting with each to review your goals and strategies, develop the Methods of Assessment and to obtain their approval.The guidelines below will assist you.

**PREPARATION**

As you begin to develop your academic learning/application goals, first consider how you have prepared for this academic internship experience. Consider activities which have contributed to your:

* cultural and region-specific knowledge/background
* content-specific or background knowledge required to successfully perform internship tasks (e.g. language skills)
* knowledge of current events impacting the organization and its work

1. Note any previous coursework that may contribute to your success in this internship and why.

1. List experiences you have had that may have prepared you for important aspects of this internship. *For example, if you are interning abroad and have traveled abroad before, jot down a few notes about what your previous travel experience taught you, and how that may impact your internship experience.*

1. Note any additional activities or personal connections you have which will inform your internship experience (e.g. books or articles you have read about the industry or the work, people you have met from the organization, faculty members you have connected with, etc.).

**GUIDELINES FOR ACADEMIC LEARNING GOALS (see next page)**

**Purpose of the Learning Plan**   
The purpose of this plan is to help you think through your goals for *academic learning and/or application* prior to the internship experience. While you are likely to learn comprehensively during your internship experience, focusing on a few key academic learning goals will facilitate the learning process throughout the internship. ***We encourage you to consider at least two academic learning goals (including one related to skill development & citizenship), and at least one goal related to professional development.*** Learning goals should be reflective, intentional, relevant to your internship experience, and complemented with strategies that allow you to work toward your goals.

*Here are a few ideas for how to state your learning goals:*  
 “I will demonstrate the ability to…“ “I will intentionally explore…”   
 “I will apply theory/concepts/learning from \_\_\_\_\_ courses to…” “I will learn/develop…”

**SKILL DEVELOPMENT & CITIZENSHIP:** Depending on the focus of your internship, you will likely have a chance to develop discipline-specific and/or transferable skills. Discipline-specific skills will depend on your major/concentration (e.g. medical record keeping, accounting, creative design, editing). In addition to discipline-specific skills, consider the following transferable skill areas as you contemplate your learning goals.

*Consider the following types of transferable skills:* communication (written and/or oral), organizational/planning, leadership, adaptability, critical thinking, information literacy, research/data collection, creativity/problem solving, cross-cultural skills, etc.

**PERSONAL/PROFESSIONAL DEVELOPMENT, CAREER AWARENESS:** In addition to your academic learning/application goals, consider how this experience will allow you to develop professionally. Consider your values, skills, interests, abilities and how they may impact or be impacted by this learning experience. Take every opportunity to learn about specific career positions and occupations, training required, professional development opportunities. Consider how this internship will contribute to your understanding of the workplace, operational procedures, organizational culture/structure, sense of the overall work environment.Contemplate your short-term and long-term career goals.

|  |  |  |
| --- | --- | --- |
| Learning Plan Student: Use the guide on page three and complete a draft of your learning goals and strategies before consulting with your faculty and site supervisors to finalize. | | |
| Learning Goals  *What you want to learn or be able to do.* | learning Strategy How you are going to learn, resources you’ll use. | Methods of assessment (academic activities) How you will show what you have learned |
| *List at least two primary goals for academic learning/application (consider skill development and/or citizenship)*  1.  2.  List one or more goals related to personal/professional development and career awareness:  1. | *Use your internship job description as a guide.*  1.  2.  1*.* | Faculty Supervisor: Describe specific expectations for ongoing reflective and closing activities. Indicate how often you will correspond with the student intern, how you plan to receive completed work, etc.  \*Additional resources on supervising academic interns can be found at http://wp.stolaf.edu/pipercenter/faculty-supervising-intern/ONGOING Evaluation/Reflection Due Date(s):  *Describe how progress toward the learning objectives will be measured. Indicate requirements for ongoing evaluation (e.g. periodic journals, reflection on learning goals, readings, reaction essays, etc.).*  ***Description:***    Integrated Project/Closing Activity Due Date:  *Provide description and criteria for the closing activity, which is intended to facilitate thoughtful reflection and integration of academic and experiential learning (e.g. integrated paper, reflective paper, portfolio, oral presentation, etc.). Must be submitted prior to the date grades are due to the Registrar’s Office.*  ***Description:***    **FACULTY SIGNATURE REQUIRED ON PAGE 5.** |

**REquired Signatures FOR ALL ACADEMIC INTERNSHIPS**

*If acquiring signatures over email, please attach a printed copy of the email that includes the time/date stamp at the top. Typed signatures will not be accepted. Email signatures MUST acknowledge the information listed next to the applicable party below.*

1. **Intern:** I agree to follow through with all statements made on this application form by my site supervisor, faculty supervisor and myself. I will initiate regular contact with my supervisors, complete assignments promptly, and adhere to all organizational arrangements, procedures, and standards of ethical conduct. I will meet all deadlines set by my supervisors, including those related to final evaluation procedures so that a grade can be reported by the grades due date. I understand that neither St. Olaf College nor the internship sponsor assumes any liability in the event of accident, illness or damage to or loss of personal property.

Signature: Date:

1. **SITE SUPERVISOR:** I have discussed this internship with the student and negotiated and assigned the work components that appear in the attached job description. I agree to provide assistance and necessary training and consultation to help the intern complete the Learning Plan. I further agree to provide the intern with an orientation concerning relevant organizational policies, procedures and functions and to meet with the intern regularly and to be available to counsel, mentor and advise for the duration of the internship. I agree to conduct a mid and final evaluation of the intern and to participate in a site visit by a St. Olaf faculty person and/or the Internship Director if requested.

Signature: Date:

1. **FACULTY SUPERVISOR:** I have discussed, reviewed and approved the student’s Learning Plan and site job description. These statements constitute a valid learning experience worthy of academic credit in the listed academic department/program. I agree to be in regular contact with the student as outlined in the Learning Plan, evaluating the integrated project/closing activity, contacting the site supervisor if necessary, participating in an on-site visit if possible, and submitting a grade (P/N) by the grades due date.

Signature: Date:

1. **DEPARTMENT CHAIR** (OPTIONAL: required only if counting internship credit towards major): I have discussed, reviewed and approved the student’s Learning Plan and position description. They constitute a valid learning experience worthy of academic credit. I approve this internship to be counted towards the requirements fulfilling this student’s major.  *\*Students: this request should be made to at least 4 days prior to when you would like it to be approved.*

Signature: Date:

1. **VISA COORDINATOR IN INTERNATIONAL & OFF-CAMPUS STUDIES** (International Students Only):

International students must be aware of special internship policies <http://wp.stolaf.edu/pipercenter/international-students-and-internships/> and must have the internship approved by the Visa Coordinator in International and Off-Campus Studies.

Signature: Date:

1. **PIPER CENTER** (last to sign, appoint. required-- request an “Academic Internship Review” appoint. in Ole Career Central)**:**   
   In my judgment the learning objectives described in the Learning Plan constitute a valid experiential learning experience. The position description and responsibilities set forth from the internship site meet the guidelines for a valid internship experience and introduction to the world of work. I agree to work with the student, faculty supervisor and site supervisor to ensure that objectives, strategies and evaluations of the internship are fulfilled.

Signature: Date:

1. **REGISTRAR’S SIGNATURE** *(after approval from the Piper Center and submission to the Registrar’s Office*)**:**

Signature: Date:

# ST. OLAF COLLEGE ~ STUDENT INTERNSHIP AGREEMENT

*This is a Release. Please read carefully.*

Student must submit this completed form to the staff in the Piper Center when registering for an academic internship.

I,      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, **ID#** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** am a student at St. Olaf College and plan to undertake an

**(student name – please print)**

**Internship during:**  Fall Semester  Interim  Spring Semester  Summer

at the following location:      **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(Internship/Externship Site) (city/state/country)**

St. Olaf College itself does not control the way in which the internship work experience and the internship site is structured or operates. In granting academic credit for this internship, the College affirms that, to the best of its judgment, the experience is an appropriate curricular option for students in a liberal arts program of study and worthy of St. Olaf College credit from the Internships program in the Piper Center but makes no other assurances, expressed or implied, about any travel and living arrangements the student has made.

St. Olaf College does not knowingly approve internship opportunities which pose undue risks to their participants. However, any internship or travel carries with it potential hazards which are beyond the control of the College and its agents or employees.

# INSURANCE COVERAGE

I have sufficient health, accident, disability and hospitalization insurance to cover me during my internship. I further understand that I am

responsible for the costs of such insurance and for the expenses not covered by this insurance, and I recognize that St. Olaf College does not have an obligation to provide me with such insurance.

I assume full responsibility for any undisclosed physical or emotional problems that might impair my ability to complete the experience, and I release St. Olaf College from any liability for injury to myself or damage to or loss of my possessions.

I understand that if I use my personal vehicle for the benefit of the agency with whom I perform my internship, St. Olaf College has no liability for personal injury or property damage which may result from that use. I agree to rely solely on my personal vehicle insurance coverage and on any insurance coverage provided by my internship agency.

I understand that I will not be entitled to unemployment compensation benefits upon completion of my internship. Further, I understand that

St. Olaf College assumes no liability for personal injury which I may suffer in the course of my internship and agree to be responsible for ascertaining whether my internship/externship agency provides workers compensation coverage for me.

# PERSONAL CONDUCT

I understand that the responsibilities and circumstances of an off-campus internship may require a standard of professional decorum.

Therefore, I indicate my willingness to understand and conform to the professional standards of the internship. I further understand that it is

important to the success of the present internship and the continuance of future internships that interns observe standards of conduct that would not compromise St. Olaf College in the eyes of individuals and organizations with which it has dealings, and I acknowledge the College Internship Assoc. Director’s responsibility for setting rules and interpreting conduct for this purpose. I agree that should the College Internship Assoc. Director decide that I must be terminated from my internship because of conduct that might bring the program into

disrepute, or the internship into jeopardy, or violates St. Olaf College policy, that decision will be final and may result in the loss of academic credit or recognition by the Office for Internships.

# GENERAL RELEASE

I understand that St. Olaf College reserves the right to make cancellations, changes or substitutions in cases of emergency or changed conditions or in the general interest of the academic internship program. I understand that the St. Olaf College Internship program may take any actions she/he considers to be warranted under the circumstances to protect my health and safety and/or to guard the integrity of the Internship Program, including termination of the internship experience.

It is further expressly agreed that the internship site and its use of any and all facilities shall be undertaken by me at my sole risk and that St. Olaf College shall not be liable for any and all claims, demands, injuries, damages, actions, or causes of actions, whatsoever to me or to my property arising out of or connected with the internship and with the use of any and all services, or facilities associated with the internship, whether or not sponsored by St. Olaf College. I do hereby expressly forever release, discharge and covenant not to sue St. Olaf College, its governing board, employees or agents as to any and all acts of active or passive negligence and/or liability that may arise out of injury or harm to me, death, or property damage resulting from my participation in this internship.

**STUDENT SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_**