Internship Application Packet

Centenary University Career Development Center

For PSYCHOLOGY, SOCIAL WORK, or EDUCATION students – contact your Department Chair for specific internship guidelines. * Department guidelines may change - therefore it is crucial that you discuss internship opportunities with your advisor before beginning this process*

Your name:

_____

Semester completing internship:

_____

To be completed by Student:

Semester (circle or bold): Fall Spring Summer I Summer II Year: _____

Number of Credits: _____ *(1 Credit = 37.5 Internship Hours)* Paid Internship (circle): Yes No

Name**:** _____ Student ID: _____ GPA*: _____

***If student has a 2.5 GPA or lower:** Faculty Advisor initials: _____ Department Chair/Dean initials: _____*

Address: _____

Email: _____ Tel: _____

Anticipated Graduation Date: _____Major: _____

To be completed by Internship Host Site:

Host Site Name: _____

Host Site Address: _____

Host Site Supervisor: (Print Name) _____

Title: _____

Tel: _____ Email: _____

(**Required**) Internship Start Date: _____ Internship End Date: _____

Days and Hours: _____

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Internship Responsibilities (please print below or attach):

_____
_____
_____
_____
_____

To be completed by Faculty Advisor:

Academic Assignment (please print below or attach)**:**

_____
_____
_____

Learning Objectives (please print below or attach)**:**

_____
_____
_____

SIGNATURES OF APPROVAL (MUST complete in following order):

- ***I agree to complete and return this application by the due date above, secure all required signatures of approval prior to beginning the internship, and abide by additional department regulations.***
- ***I agree to carry out the internship duties/responsibilities as indicated by my site supervisor.***
- ***I understand that I must complete all required internship hours in accordance with the Internship Policy and am responsible for completing a timesheet, which is to be signed by my supervisor at the completion of the internship.***
- ***I understand that if this internship is unpaid, I will not be receiving monetary compensation for the dates stated above and am not guaranteed a position after the internship is completed.***

Signature: _____ **Date**: _____
Student *Print Name*

- ***The internship, even though it includes actual operation of the facilities of the host site, is like training which would be given in an educational environment.***
- ***The internship experience is for the benefit of the intern.***
- ***The intern does not displace regular employees but works under close supervision of existing staff.***
- ***The host site that provides the training derives no immediate advantage from the activities of the intern; and on occasion its operations may be impeded.***
- ***The Host Site must provide a safe working environment for the intern.***
- ***The Host Site Supervisor will allow for a site visit (circumstances permitting)***
- ***The intern is not entitled to a job at the conclusion of the internship.***
- ***The intern and employer clearly understand that there is no expectation of compensation (if unpaid)***

- ***The skills or knowledge learned must be transferable to other employment settings.***
- ***The experience has a defined beginning and end date, and a job description with desired qualifications.***
- ***There are clearly defined learning objectives related to the professional goals of the student's academic coursework.***
- ***The internship accommodates the intern's academic commitments by corresponding to the academic calendar.***
- ***There is routine feedback by the experienced supervisor.***

Signature: _____ **Date**: _____
Host Site Supervisor *Print Name*

Signature: _____ **Date**: _____
Faculty Advisor *Print Name*

Signature: _____**Date:** _____
Chair or Dean of the Department *Print Name*

Signature: _____ **Date**: _____
Career Center *Print Name*

University Internship Information

Internship credits may be obtained during the fall, spring, or summer semesters. Students must complete the following number of internship hours to receive credit:

- 1 Credit Internship – 37.5 Hours per semester
- 2 Credit Internship – 75 Hours per semester
- 3 Credit Internship – 112.5 Hours per semester
- 4 Credit Internship – 150 Hours per semester
- 5 Credit Internship – 187.5 Hours per semester
- 6 Credit Internship – 225 Hours per semester
- 7 Credit Internship – 262.5 Hours per semester
- 8 Credit Internship – 300 Hours per semester

*Internship credits will be added to a student's scheduled course load and count as a class. The addition of a credited internship may put a student over the 18-credit limit, in which case the student will be responsible to pay for the overage. Any internship completed for credit during Summer I or Summer II session will be paid for on a per-credit basis.

The student consults with his/her faculty advisor, develops learning objectives, and completes all academic requirements. The student attends classes on campus while maintaining the responsibilities of the internship.

Note: An internship must be a program-related, horizon-expanding experience.

Department Internship Procedures

1. The student may visit the Career Development Center to explore internship location options.
2. The supervisor at the internship site must complete the "Responsibilities" section first and sign the registration form before the student continues the application process.
3. The student then consults with their faculty advisor, who will assign learning objectives and an academic assignment, and signs the form. No student will receive credit without the signed consent of his/her advisor.
4. The student then sees the Department Chair, who will approve and sign the registration form.

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5. The student will return the paperwork with the required signatures to the Internship Coordinator in Career Development for approval, who will forward it to the registrar's office for the final signature.
6. The student must complete and submit all paperwork to the Career Development Center, as well as register internship credits with the Registrar, **two weeks** from the time they are given the paperwork. If this deadline is not met, the student may be denied the internship for credit opportunity.
7. All paperwork should be filed with the Registrar's Office prior to the student beginning their internship hours.

Academic Internship Program Policies

To be eligible for internship credits, a student must:

- Have a minimum cumulative GPA of 2.5 prior to the internship semester.
- Have completed at least 30 academic credits.

The following regulations must be followed to obtain internship approval:

- Current full-time employment may not be used for internship credit unless the internship is based on new responsibilities which are directly tied to coursework.
- The intern may not be supervised by a relative.
- All internships must be approved prior to beginning internship duties.
- Students may not complete an unapproved internship at any time and attempt to receive credit for it afterwards.
- Summer internship credit may not be transferred to any other semester.
- Students must be attending Centenary University at the time of the internship to receive academic credit for it.

At the completion of the internship, an evaluation form is sent to the employer, and the completed form is then given to the academic advisor to use in determining the student's internship grade. Students are also asked to complete a student evaluation at the completion of their internship for assessment purposes. These forms are attached below.

Instructions for the Add/Drop form (next page):

1) Fill in all required fields (red text) - *including both required signatures!*
Under the "Courses Added" section:
For "Course #," put "INT-000-A"
For "Title," put "Temp Int Credits"
For "Credits," put the number of credits you will be earning for your internship (37.5 internship hours = 1 academic credit, 75 internship hours = 2 academic credits, etc.)
2) Scan and email to the Add/Drop form to registrar@centenaryuniversity.edu
3) Read the Refund Policy below

Undergraduate and Graduate Program Students – Fall & Spring Semesters*
Refunds of the Semester Charges paid will be made in accordance with the following schedule:

WITHDRAWAL PRIOR TO THE 1ST DAY OF THE SEMESTER - 100%
WITHDRAWAL DURING THE 1ST 5 DAYS OF ADD/DROP AND LATE REGISTRATION – 100%

WITHDRAWAL AFTER ADD/DROP AND LATE REGISTRATION- 0 %

The date used to calculate the specific period of enrollment shall be the date on which the student notifies the University, as stated above, of his/her intent to withdraw or take a leave of absence from the University or a course. Withdrawals will be made in accordance with any federal and/or state loan or grant program regulations.

Traditional Summer Programs*:
Refund of Semester Charges will be made in accordance with the following schedule:

WITHDRAWAL PRIOR TO THE 1ST DAY OF A SUMMER SESSION - 100%
WITHDRAWAL DURING THE 1ST 5 DAYS OF ADD/DROP AND LATE REGISTRATION - 100%
WITHDRAWAL AFTER ADD/DROP AND LATE REGISTRATION- 0%

The date used to calculate the specific period of enrollment shall be the date on which the student notifies the University, as stated above, of his/her intent to withdraw or take a leave of absence from the University or a course. Withdrawals will be made in accordance with any federal and/or state loan or grant program regulations.

* Due to new regulations regarding the return of Federal and State funds, any student receiving Federal/State grants or loans should contact the Financial Aid Office (ext. 2350) before withdrawing or taking a leave of absence.

For more detailed information (including exceptions to Refund Policy):
https://www.centenaryuniversity.edu/admission-aid/student-accounts-office/refund-policies/

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Add/Drop Form

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Please note, areas in **RED text are required fields. Any information left blank may delay processing of this form.

I am a: ☐ Full Time Student ☐ Part Time Student ☐ Graduate Student			**Term:**
Name:		**Student ID #:**	**Telephone Number:**
Home Address:			

Courses Added

Course #	Section	Title	Credits	Instructor

Courses Dropped

Course #	Section	Title	Credits	Instructor

Advisor's Signature:	Date:

I agree to abide by the rules & regulations of Centenary University as stated in the catalog and on the back (or 2Nd page) of this form.*All changes to your schedule must be done on an Add/Drop form in the Registrar's Office.

Student Signature:	Date:

SEE REFUND POLICY ON BACK OF THIS FORM

Revised: March 16, 2020. Property of Centenary University of New Jersey, 400 Jefferson Street, Hackettstown, NJ 07840-(908)852-1400

Centenary University
Career Development

INTERNSHIP TIME SHEET

***Hours are logged by intern during internship and approved by Internship Supervisor**

***Time Sheet MUST be given to Faculty Advisor at the completion of internship**

Intern Name: ____

Period Covered From: ____/____/_____ to: ____/____/___

Faculty Advisor: _____________________________________

DATE (MM/DD)	START TIME	END TIME	TOTAL HOURS

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Intern Signature: _____ Date: ____/____/_____
Host Site (Print Name, Title): _____
Host Site Signature: _____ Date: ____/____/_____
*If more room is needed, request additional time sheets via CareerCenter@CentenaryUniversity.edu

Internship Evaluation – Employer Please return this form to:
Kerry.Mullins@CentenaryUniversity.edu
and cc: your Faculty Advisor

Student Name: _____ Semester: _____

Organization/Host Site: _____

Supervisor Name & Title: _____

Please respond to the following based on the performance of your intern. Your responses will not be shared with the student and are used solely to help professors determine a final grade.

	Yes	Occasionally	No
Intern was prepared to perform internship duties	____	____	____
Intern carried out assigned duties	____	____	____
Intern showed initiative and acceptance of responsibility	____	____	____
Intern followed policies and procedures	____	____	____
Intern worked well independently	____	____	____
Intern worked well in a group setting	____	____	____
Intern dressed appropriately for the position	____	____	____
Intern was an asset to the organization	____	____	____

Circumstances permitting, would you employ this student in a career position after graduation?

Yes _____ No _____

Any additional comments? Please type them here or attach a separate page. **Thank you!**

Internship Evaluation - Student

Please return this form to:
Kerry.Mullins@CentenaryUniversity.edu
and cc: your faculty advisor

Name: _____Major: _____

Semester:_____ Organization/Host Site:_____

For questions 1 -8, circle or underline your answer:

(1) Do you feel the Learning Objectives you developed with your Faculty Advisor were consistent with what you did at your internship?

Yes Somewhat No

(2) How structured was your internship experience?

Highly Structured Moderately Structured Not Structured

(3) Were you given significant responsibilities and challenging work assignments?

Always Most of the time Sometimes Rarely

(4) Did you perform a variety of tasks and activities?

Always Most of the time Sometimes Rarely

(5) Were you given independence in what you worked on and how you worked on it?

Always Most of the time Sometimes Rarely

(6) How often did you receive feedback on your performance?

Daily Weekly Per Project Other

(7) How useful was the Internship experience in relation to your career objectives?

Very Useful Somewhat Useful Not Useful

(8) Would you recommend this internship to other students in your major?

Yes Maybe No

(9) What did you like about this internship experience?

(10) What did you dislike about this internship experience?