

ROWAN UNIVERSITY
School of Professional Studies
INTERNSHIP INTAKE FORM

PART 1

Step 1: Complete and sign Part 1	Step 2: Work with your internship supervisor to complete Part II. Internship supervisor MUST sign here.	Step 3: Submit to sops@rowan.edu for final approval
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Student Name: _____ Rowan ID: _____
Local Address: _____ Telephone: _____
Major: _____ Rowan Email: _____
Credit Hours Completed: _____

Total # of credits taken during internship semester*: _____

Semester receiving credit: Fall 20____ Spring 20____ Summer 20____

Students must submit this Intake Form before the first day of the semester in which they are receiving credit.

Receiving Academic Credit for your Internship

*The hour requirements for the internship course are as follows: **3 credits = a minimum of 120 hours = approximately 10 hours per week***

The internship will involve, but not limited to the following assignments: Discussion questions, Reflection papers, Ongoing hours logs, Performance Evaluations, Summaries, List of References, Letters of Recommendation, Revised Resume, Observations, Focus Groups, Inventory, Informational Interview, Electronic Job Search Exercise, or Ethics Case Study

I have discussed and understand some of the duties of the internship as identified above with my advisor. I understand that the internship is a requirement of my program. I will consult with the program advisor about credits and hours, and to determine how or if my current employer can satisfy the requirements for the internship.

Student Signature: _____ **Date:** _____

PART II

Title of Internship Position: _____ **Internship Format:** ____ Virtual ____ In-Person

Compensation? If so, please describe: _____

Planned Dates of Internship: _____ **Planned Hours per Week:** _____

Organization Name & Address: _____

Immediate Supervisor: _____ **Title:** _____

Telephone: _____ **Email:** _____

To be approved, internships must include rich developmental experiences beyond clerical work. Please attach the job description of your internship. Be sure to email all documents to the program advisor for approval and registration.

I have discussed the internship requirements with the student. The attached Confirmation Letter demonstrates my support his/her/their pursuit of rich developmental experiences and academic credit for the hours completed during the internship.

Signature of Internship Supervisor: _____ **Date:** _____

PART III

To get approval for the internship, email the completed intake form with the internship job description to Charles Stewart, Advisor at sops@rowan.edu. If approved, you will be emailed a Course Reference Number (CRN) to register for the Internship course.

Signature of Program Advisor: _____ **Date:** _____