BETHANY LUTHERAN COLLEGE INTERNSHIP
Application & Approval Form

Section 1: Student Applicant (Complete Section 1 and forward to your faculty advisor)

Name_______________________________________________ Date _____________________

Phone _______________________________ Email ________________________________

Class level ______________________________ Graduating ____________________________

Academic Advisor ____________________________________________ GPA _____________

Academic Internship Advisor ____________________________________________

Term for participation:  □ Fall 20___ □ Spring 20___ □ Summer 20___

Time commitment: □ Full-time □ Part-time (Hours/week desired) __________

Declared Major: _______________________ Estimated number of credits to be earned: _____

Do you, the candidate of this form, waive your right of access (as afforded under law) to the information provided in this form?  □ Yes  □ No

Student Signature ____________________________________________ Date ______________

Section 2: Faculty Advisor

The student named above is applying for an internship. Take a few minutes to respond to the following questions. Information from this form may be shared with prospective site sponsors. Please note the student’s response above regarding waiver of access.

1. Will an internship experience (as defined above) fit into the student’s curriculum plan?
   □ Yes  □ No  □ Uncertain

2. Indicate how well you know this candidate (check one):
   □ Very well  □ Fairly Well  □ Somewhat  □ Hardly know

3. Check the most appropriate response below:
   □ I heartily recommend this candidate for an internship
   □ I recommend this candidate for an internship
   □ I hesitate to recommend this candidate for an internship
   □ I cannot recommend this candidate for an internship
   □ Please call me to discuss. My extension is _________

4. If you wish, please comment on any responses above and/or on the character of the student.
   (Use the reverse side of this sheet, if needed)

Faculty Advisor (please print last name) _____________________________________________

Faculty Advisor Signature __________________________________ Date ______________
Bethany Lutheran College
STUDENT INTERNSHIP AGREEMENT
This is a release. Please read carefully.

Student name (please print):__________________________________________________

Semester of planned internship (circle): fall spring summer of year:_____

Location of planned internship (city, state, country):_______________________________

Bethany Lutheran College itself does not control the way in which this educational opportunity is structured or operates. In granting credit for this internship, Bethany affirms that, to the best of its judgment, the experience is an appropriate curricular option, and worthy of Bethany credit but makes no other assurances, expressed or implied, about the travel and living arrangements the student has made.

Bethany Lutheran 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 any expenses not covered by this insurance, and I recognize that Bethany Lutheran 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 Bethany Lutheran College from any liability for injury to myself or damage to or loss of my possessions.

PERSONAL CONDUCT

I understand that the responsibilities and circumstances of an off-campus internship may require a standard of decorum which may differ from that of Bethany Lutheran College, and I indicate my willingness to understand and conform to the standards of the internship site. 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 Bethany Lutheran College in the eyes of individuals and organizations with which it has dealings, and I acknowledge the Internship Coordinator's responsibility for setting rules and interpreting conduct for this purpose. I agree that should the Internship Coordinator decide that I must be terminated from my internship because of conduct that might bring the program into disrepute or the internship site into jeopardy, that decision will be final and may result in the loss of academic credit.

GENERAL RELEASE

I understand that Bethany Lutheran College reserves the right to make cancellations, changes or substitutions in cases of emergency or changed conditions or in the general interest of the internship program.

It is further expressly agreed that the internship site and use of any and all of its facilities shall be undertaken by me at my own sole risk and that Bethany Lutheran College shall not be liable for any and all claims, demands, injuries, damages, actions, or causes of actions, whatsoever to me or 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 Bethany Lutheran College; and I do hereby expressly forever release and discharge Bethany Lutheran College from any and all claims, demands, injuries, damages, actions, or causes of action, arising from or related to any and all acts of active or passive negligence on the part of Bethany Lutheran College and/or its officers, employees, or agents.

STUDENT SIGNATURE: ______________________________________________________ DATE:

(If student is under the age of 18 at the time of internship)

PARENT/GUARDIAN SIGNATURE: ________________________________________
BETHANY LUTHERAN COLLEGE

Intern Job Description

Job Title __________________________________________________

Company Name _______________________________________________________

Company Supervisor ___________________________________________________

Address ______________________________________________________________

Telephone ___________________ _____________________Email_________________________

Person to Contact (if different from supervisor) _______________________________

Days of the Week Needed ________________________________________________

Hours Needed ___________________________________________

Compensation ________________________________________________________

Job Description (duties and responsibilities of intern):

Qualifications (special skills, training, education, or experience required/preferred):
Bethany Lutheran College internship program requires each student intern to collect learning demonstration during the course of his/her internship. Please fill out the below agreement, authorizing the release of learning demonstrations listed on __________________________’s contract.

I, ________________________________________ of __________________________________  authorize the release of learning demonstration materials listed on intern’s learning contract for the purpose of academic grading. I acknowledge that this information will remain a part of the intern’s internship portfolio.

I, ________________________________________ of __________________________ DON NOT authorize the release of learning demonstration materials listed on intern’s learning contract for the purpose of academic grading because student will be working with: (check all that apply)

☐ Confidential Client Information  ☐ Minors  ☐ Other (please specify below)

__________________________________________________________________________________________________

__________________________________________________________________________________________________

__________________________________________________________________________________________________

__________________________________________________________________________________________________

__________________________________________________________________________________________________

*If you DO NOT authorize the release of information for internship learning demonstrations, please have student intern provide a copy of your company’s SIGNED and DATED nondisclosure/confidentiality agreement.

*This DOES NOT include intern journaling that is required to complete student’s internship portfolio.

Site Supervisors Signature____________________________________________  Date:___________
BETHANY LUTHERAN COLLEGE INTERNSHIP PROGRAM LEARNING CONTRACT

STUDENT NAME: ___________________________________________ Student ID # ________ US Citizen? yes ☐ no ☐ Expected Yr. Grad ______

(First) (MI) (Last)

Student Address: ___________________________________________ Email: _______________________ Ph: ( ) ___________

(mailing address during internship) (City) (State) (Zip)

Major: ___________________________________________ Minor: _____________________________ Contract for Term ________ Year______

Start Date: _____/_____/______ End Date:_____/_____/_____ Hrs/Wk:_______ Credits:_____ Paid ☐ Unpaid ☐

FACULTY ADVISOR : __________________________________________ Dept.: ________________________ Phone: (507) 344-________

SITE SUPERVISOR: Mr. ☐ Ms. ☐ ___________________________ Phone: __________________ Fax: ___________

INTERNSHIP SITE & MAILING ADDRESS: __________________________________________________________

INTERNSHIP TITLE:_________________________________________ Site Website:_____________________________________________

Languages required at this site? __________________________ Level of language proficiency: Beginning  Moderate  Fluent  N/A

Does intern work with minors?  Yes____  No____  Did intern undergo a formal background check? Yes___  No____

Type of Site (not position): ☐ Non-profit  ☐ Gov’t  ☐ Corporate  ☐ Arts  ☐ Educ  How did you find this internship? ______________________

<table>
<thead>
<tr>
<th>Learning Tasks &amp; Strategies</th>
<th>Learning Objectives</th>
<th>Academic (AC) Skill (SK) Personal (PR) Development</th>
<th>Learning Demonstrations (Products)</th>
<th>Target Date</th>
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Faculty Advisor: I agree with all components of this Learning Contract. In my judgment, the student is adequately prepared to meet the terms of the contract, and I agree to work with the student to ensure that objectives, strategies, and learning outcomes of the internship are carried out.

Faculty Advisor Signature: ___________________________ Email: _______________________ Date: ____________

Student: I agree with all components of this Learning Contract, will work towards the objectives, pursue the strategies, and complete the outcome measures to the best of my ability

Student Signature: ___________________________________________ Email: ______________________ Date: ____________

Site Supervisor: I have read this Learning Contract, and attest that its components meet the standards and expectations for an internship with my organization. I have provided a position description and agree to conduct two evaluations of the student by the deadlines stipulated by the program, and to participate in a site visitation if requested.

Site Supervisor Signature: ___________________________ Email: _______________________ Date: ____________

Internship Program Coordinator: ___________________________ Date: ____________
COMPLETING THE LEARNING CONTRACT
You and your faculty advisor should work together to plan all aspects of your internship and complete the Learning Contract. The Learning Contract is the most important document in your internship paperwork. If well done, it is the best guarantee that your experience will be educational and worthwhile. So it is worth some concentrated attention. Throughout the development of your Learning Contract, be careful, thorough, and specific.

STEPS TO COMPLETING THE INTERNSHIP LEARNING CONTRACT:
1. Get a position/job description from your site supervisor that describes your role and responsibilities as an intern.
   This must be attached to your Learning Contract to register your internship.
2. Identify the key Learning Tasks involved in your internship
   Refer to the internship position/job description to see what you will be doing. Select the tasks most important to your learning, especially as they pertain to your studies and discipline, and list them in the Learning Tasks and Strategies column (the first column). These tasks become your “learning strategies” because you will be learning by doing them.
3. For each task specify a learning objective.
   Consider each task listed in the first column, and determine what you hope to learn from carrying out that task. Note this in the Learning Objectives column to the right.
4. Categorize each learning objective.
   It will clarify your planning if you sort your objectives according to the three categories below. Place the appropriate code letters in the middle column. Is your learning in each case a matter of academics (head knowledge), or of skill development, or of personal development?
   AC Academic Learning and Application (i.e., related to the ideas, concepts, or theories of your major or minor field (s) of study and ideas or concepts related to the Liberal Arts perspectives)
   SK Skill Development (i.e., skills specific to your academic major or an occupation; and/or general skills such as oral and written communication, critical thinking, organization, problem solving, decision making, leadership, interpersonal relationships, technical, computer, etc.)
   PR Personal Development (i.e., self-confidence, self-awareness, self-management, sensitivity and appreciation for diversity, clarification of work and personal values, career awareness and professional development, etc.)
5. List the products of your work that will demonstrate your learning and attainment of each learning objective.
   These go into the “Learning Demonstrations (Products)” column. Products may include journaling, a reflection paper, a research paper, an essay, a poster presentation, a public presentation/performance of a project from the internship, etc. They may also involve a collection of what you produced on the job – letters you wrote to customers or clients, posters you designed for an ad campaign, etc. Expectations for demonstrating your learning should correspond to the number of credits earned (i.e., more should be expected for a 4-credit than a 2-credit internship.)
6. State the Target Date by which each of the Learning Demonstrations (products) will be achieved.
7. Bring your first draft of the Contract to your Internship Advisor for comment and revision.
   After this consultation, expect to revise and clarify the contract, and bring it again to your advisor for final approval.
8. Gather the needed signatures
   Three are required – yours, your Internship Advisor’s, and your Site Supervisor’s. Remember that this must be done before you start work. Any work done at the site before the contract is completed and signed does not count toward internship requirements.

REGISTRATION PROCESS
Deadlines – Fall and Spring Terms: second week of semester in which you intend to do your internship.
Summer Term: June 1

Required Paperwork: application, a completed and signed Learning Contract, Student Internship Agreement, and a Job Description.
Routing: Bring all completed paper work to the Internship Program Coordinator for approval and signature, and then take the registration form to the Registrar’s Office.

Relevant Policies:
• No more than four internship credits may be earned at the same site (see the Internship Program Coordinator for exceptions).
• Students not eligible for academic internships: 1) Individuals on academic probation; 2) all First and Second Year Students.
• To drop or withdraw from an internship, students must obtain the faculty advisor’s signature and the signature of the Internship Program Coordinator.
• Summer registration requires summer tuition payment. Note: International students participating in a paid summer internship usually register for one credit and apply for Curricular Practical Training.
• Hours requirements by registered credit:

Fall or Spring Internships

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<th>Credits</th>
<th>Hours/Week</th>
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- Fall and Spring Internships
- Registration Information

For additional information call the Internship Office (507-344-7321), located in OM 225, Bethany Lutheran College, Internship Program, 700 Luther Drive, Mankato, MN 56001 (507) 344-7321
Bethany Lutheran College
Internship Hour Summary

Intern Student’s Name ____________________________________________________________
Internship Site __________________________________________________________________
Internship Site Supervisor __________________________________________________________
Internship Address __________________________________________________________________
Dates (Semester & Year) of Internship _______________________________________________

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4 credits = 180 hours per semester, or approx. 10-12 hours/week
3 credits = 135 hours per semester, or approx. 7-9 hours/week
2 credits = 90 hours per semester, or approx. 4-6 hours/week
1 credit = 45 hours per semester, or approx. 1-3 hours/week
Internship Journal Entry Helps

**Weeks 1 and 2:**
1. Develop an organizational chart for agency and the department in which you work and indicate where you fit into the system.
2. Describe the goals and objectives of the agency and the department for which you work.

**Weeks 3 and 4:**
3. Locate articles from professional literature that reflect the area in which you are working and write a one-page statement on how the information contained within the article relates to your assigned tasks. Review the article and your one page statement with your internship academic advisor.
4. Listen for “quotes of the day” said by persons around you or discovered in your reading. Jot them in the journal and write down your reactions; relate to your major when possible.

**Weeks 5 and 6:**
5. How have your skills fit in with those of agency representatives?
6. What are the job performance expectations in your agency? How do they compare with the academic expectations you have experienced as a student?

*Determine whether you are on track to fulfill the learning objectives listed on the original learning contract. If not, should these objectives be modified in view of unpredicted circumstances? (Be sure to consult your internship academic advisor and site supervisor regarding any possible modifications.)*

**Weeks 7 and 8**
Review your preceding journal entries and also reflect on experiences that you have not yet discussed in your journals. Then respond to the following questions:
7. What is the most surprising discovery or unexpected experience – whether positive or negative – that you have encountered in this internship, and how did you respond to it?
8. Select one class in your major and apply concepts to your experience.

**Weeks 9 and 10:**
9. How does the formal organizational chart in the agency compare with the informal one? What impact does information communication have on the organization?
10. What factors in the agency seem to contribute to employee job satisfaction and productivity?

**Weeks 11 and 12:**
11. In what ways did your knowledge of principles help you accomplish the tasks associated with your internship duties?
12. Have any of your assumptions about the working world changed as a result of your internship experience? If so, how?

**Weeks 13 and 14**
13. What did you learn through the internship about the relationship between theories and practical experience? In what ways do they interrelate and in what ways do they fail to do so?
14. Select one class in your major and apply concepts to your experience. (Choose a different class than the one selected during weeks 7 and 8.)
Mid-Course Intern Evaluation
By Site Supervisor

Student__________________________________________________________

Agency/Organization _____________________________________________

Site Supervisor _________________________________________________

Faculty Internship Advisor _________________________________________

To Site Supervisor: To provide a current assessment of the performance and progress of the student Intern working for you. Upon completion, please sit down with the student and review the evaluation form, and then fax or mail the evaluation to the faculty advisor, or provide it at the midterm site visit.

1. Please describe the major activities of your student Intern to date

2. Please comment on the Student Intern’s general work competence, including punctuality, attitude, responsibility, independence, initiative, and follow-through.

3. Have there been any changes in the Student Intern’s work description as it appears on the Learning Contract? If yes, explain.

4. Please review the Learning Contract and comment on the progress the Student Intern has made in reaching her learning goals.

5. What are the Student Intern’s strengths?

6. What areas of the Student Intern’s work need improving? How can this be accomplished?

7. Comment on the value of the Student Intern’s assistance to your organization, noting any special accomplishments. How can this be increased?
8. Do you have any comments about the Student Intern or the Internship Program in general?

9. In your estimation, is the Student Intern suited to pursue a career in this field?

10. Indicate how satisfied you are with the Student Intern’s performance in the following areas:

<table>
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<tr>
<th>SATISFIED</th>
<th>NOT AT ALL SATISFIED</th>
<th>SATISFIED</th>
<th>EXTREMELY</th>
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<td>Possesses necessary writing skills</td>
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<td>Shows ability to work independently</td>
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<td>Able to accept and use constructive feedback</td>
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<td>Shows creativity &amp; originality on assignments</td>
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<td>Presents an appropriate personal appearance</td>
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<td>Overall assessment of the Student Intern</td>
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Site Supervisor signature ________________________________

Student Intern signature ____________________________ Date ________
INTERNERSHIP SITE VISIT REACTION FORM  
(to be completed by Internship Advisor following site visit)

Intern’s Name ____________________________ Date ____________

Supervisor’s Name ____________________________

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<th>Excellent</th>
<th>Poor</th>
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<tbody>
<tr>
<td>Professional behavior (punctuality, dress, manners)</td>
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<td>Interaction with colleagues and supervisor</td>
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<td>Fit of student’s responsibilities to learning contract goals</td>
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<td>Consistency of responsibilities with job description</td>
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<td>Fit of student’s classroom preparation, knowledge and skills to internship</td>
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<td>Work Space</td>
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<tr>
<td>Effect of intern on job site</td>
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1. What most impresses site supervisor about intern?

2. What one adjustment would make this student a stronger intern/this internship a better experience?

3. How could I, the Internship Advisor, better meet the intern’s needs?

4. How could I, the Internship Advisor, better meet the site supervisor’s needs?
Intern’s Name: _____________________________ Organization: ______________

1. Never demonstrates this ability/does not meet expectations
2. Seldom demonstrates this ability/rarely meets expectations
3. Sometimes demonstrates this ability/meets expectations
4. Usually demonstrates this ability/sometimes exceeds expectations
5. Always demonstrates this ability/consistently exceeds expectations

*If any criteria are not applicable to this internship experience, please leave the response blank.*

### A. Ability to Learn

1. Asks pertinent and purposeful questions
2. Seeks out and utilizes appropriate resources
3. Accepts responsibility for mistakes and learns from experiences

### B. Reading/Writing/Computation Skills

1. Reads/comprehends/follows written materials
2. Communicates ideas and concepts clearly in writing
3. Works with mathematical procedures appropriate to the job

### C. Listening & Oral Communication Skills

1. Listens to others in an active and attentive manner
2. Effectively participates in meetings or group settings
3. Demonstrates effective verbal communication skills

### D. Creative Thinking & Problem Solving Skills

1. Breaks down complex tasks/problems into manageable pieces
2. Brainstorms/develops options and ideas
3. Demonstrates an analytical capacity

### E. Professional & Career Development Skills

1. Exhibits self-motivated approach to work
2. Demonstrates ability to set appropriate priorities/goals
3. Exhibits professional behavior and attitude

### F. Interpersonal & Teamwork Skills

1. Manages and resolves conflict in an effective manner
2. Supports and contributes to a team atmosphere
3. Demonstrates assertive but appropriate behavior

### G. Organizational Effectiveness Skills

1. Seeks to understand and support the organization’s mission/goals
2. Fits in with the norms and expectations of the organization
3. Works within appropriate authority and decision-making channels

### H. Basic Work Habits

1. Reports to work as scheduled and on time
2. Exhibits a positive and constructive attitude
3. Dress and appearance are appropriate for this organization

### I. Character Attributes

1. Brings a sense of values and integrity to the job
2. Behaves in an ethical manner
3. Respects the diversity (religious/cultural/ethnic) of co-workers
J. **Open Category: Industry-specific Skills/Professional Development Plan**
   Are there any skills or competencies that you feel are important to the profession or career field (represented by your organization) that have not been previously listed in this evaluation? If so, please list those skills below and assess the intern accordingly.

   1. 1 2 3 4 5
   2. 1 2 3 4 5
   3. 1 2 3 4 5

K. **In reviewing goals stated on the Learning Contract, has the intern successfully achieved those goals?**
   Please elaborate.

L. **Comments:**

M. **Overall Performance** (if you were to rate the intern at this time)

<table>
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<th>Unsatisfactory</th>
<th>Poor</th>
<th>Average</th>
<th>Good</th>
<th>Outstanding</th>
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</table>

   Thank you very much for taking the time and energy to serve as site supervisor. Your participation is valued by both the student and the college. If you have suggestions about how we might work together, please contact the Internship Coordinator at 507-344-7321.

   Would you be interested in having another Bethany Lutheran intern work with you in the future? Yes No

   *If possible, please review your evaluation with the student before their final day on the job.*

   Has this report been discussed with the student? Yes No

   This assessment was reviewed with the intern on ___________ Intern’s Signature __________________________
   (date)

   Site Supervisor’s Signature ______________________________

Upon completion, please return to this to the intern or the Faculty Advisor

Bethany Lutheran College, 700 Luther Drive, Mankato, MN 56001
BETHANY LUTHERAN COLLEGE INTERNSHIP
Final Intern Self-Evaluation

Please respond to the following questions regarding your internship site and experience as an opportunity for frank appraisal of your internship.

Name: _______________________________________ Semester/Yr: ___________  Date: ____________________

Organization: _________________________________ Site Supervisor: ___________________________________

Please rate the following aspects of your internship experience on the basis of this scale:
(1) Poor     (2) Fair     (3) Good     (4) Excellent

SITE

Physical environment was safe                    1  2  3  4
Orientation to all areas of the organization was provided 1  2  3  4
Adequate resources were available to accomplish projects 1  2  3  4
Co-workers were accepting and helpful (I was treated like an employee) 1  2  3  4
There was enough work to keep me busy             1  2  3  4

SUPERVISOR

Supervisor provided a clear job description 1  2  3  4
Regular feedback was provided on my progress and abilities 1  2  3  4
An effort was made to make it a learning experience for me 1  2  3  4
Supervisor provided levels of responsibility consistent with my abilities 1  2  3  4
  increased responsibility as my experience increased 1  2  3  4
  was supportive of the agreed-upon work days and hours 1  2  3  4
I was encouraged to provide feedback and input 1  2  3  4

LEARNING EXPERIENCE

Work experience was related to my academic discipline and/or career goal 1  2  3  4
Opportunities were provided to develop my communication skills 1  2  3  4
  interpersonal skills 1  2  3  4
  creativity 1  2  3  4
“   “   “   “ problem-solving abilities 1  2  3  4
The internship experience has helped prepare me for the workplace 1  2  3  4

Overall value rating for this internship 1  2  3  4

Would you work for this supervisor again? Yes No Uncertain
Why? _____________________________________________________________

Would you work for this organization again? Yes No Uncertain
Why? _____________________________________________________________

Would you recommend this organization to other students? Yes No Uncertain
Why? _____________________________________________________________

Could you get a good reference from this organization? Yes No Uncertain
Explain: __________________________________________________________________________________
INTERNSHIP REFLECTION

Since the internship is primarily to be a learning experience, and the learning should be self-conscious and insightful, Bethany interns conclude each internship experience with a formal reflection program. This is a typed reflection paper (2-3 pgs).

Post-Internship Reflection

a) How successfully was your internship learning contract completed?

b) What were your special accomplishments, especially those that were surprising or beyond expectations?

c) Did any particular problems arise during the internship? Did you discover ways of avoiding or solving them?

d) Evaluate your internship site in regard to future intern use.

e) How well did Bethany’s curriculum prepare you for the experience?