



Oregon State University

Cascades

KINESIOLOGY PROGRAM

**Oregon State University-Cascades
Bend, OR 97702**

KIN 410 INTERNSHIP PACKET

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PREFACE

For students in the Kinesiology (KIN) Program, an internship experience fulfills the “experiential” requirement in the major, and provides an opportunity to apply academic knowledge to practical, real-life settings. These experiences provide “on-the-job training” under the supervision of a member of a cooperating organization as well as a member of the faculty in the Kinesiology program at Oregon State University - Cascades.

The KIN 307 Pre-Internship Seminar is a 1-credit lecture course taken in the junior year that prepares students for the KIN 410 Internship. **Each credit of KIN 410 Internship requires 30 hours of on-site work.** KIN 410 Internship is a “capstone course” usually comprised of 3 credits, (90 hours total), ideally taken during the final quarter of the senior year. If a student is taking more than 3 credits of Internship, they may divide their internship between two or more cooperating organizations with consent of the OSU-Cascades faculty member.

Many agency and businesses managers realize that they can make a significant contribution to the quality of their future programs or organizations by participating in the education of possible future employees. Those groups who open their doors to Internship students accept the professional task of providing a gainful experience while maintaining high standards of expected performance from such students.

This Internship Guide contains policies and procedures, contractual agreements, reporting forms, and evaluative reports to help ensure that the student will receive a quality practical experience.

INTRODUCTION

A successful Internship experience depends on three key factors:

1. A **student** who realizes and fulfills related responsibilities and commitments,
2. An **agency, business or industry**, which provides a work environment that supports the learning experience;
3. Appropriate **supervision** from both the cooperating organization and the Kinesiology Program at Oregon State University-Cascades.

The **student** must uphold the policies and standards of the cooperating organization and the KIN Program. The value of the personal experience gained by a student depends upon her/his commitment to assisting the agency or business in attaining its objectives.

The **cooperating organization** must provide a practical experience that builds upon the content and objectives of the courses in the student's major. The placement should provide a learning experience that supports the student's career goal.

Supervisors from the cooperating organization and from the KIN Program should monitor the progress of each student, and include 3-way communication between all parties regarding problems, solutions, challenges and evaluation.

OBJECTIVES OF THE INTERNSHIP PROGRAM

The value of the Internship experience is the positive contribution it makes to the student, the organization, and the KIN Program at Oregon State University-Cascades.

As a result of completing the KIN 410 Internship experience:

The student will:

1. apply theory and technique to actual situations, beginning the transition from the role of student to that of professional,
2. receive observational and practical field experience upon which to build their professional careers since experience is often prerequisite to the qualification for a paid position,
3. receive professional preparation on the job, under the direction of qualified personnel,
4. be evaluated on his/her developing skills and abilities, and areas of need
5. apply his/her skills toward the success of the cooperating organization, while conforming to the organization's established standards of professionalism and conduct.

The Cooperating Organization will:

1. demonstrate dedication to the student's educational program and will assist in the preparation of quality personnel,
2. uphold high standards and provide qualified staff to supervise students,
3. provide a variety of professional work experiences that expose the student to a range of duties,
4. provide opportunities for professional growth through constructive and objective criticism and by encouraging the student to engage in self-reflection,
5. consider the experience an opportunity to relate current theory and practice to the services of the organization thus serving as additional stimulus to continued professional growth,
6. consider the student as part of the staff and to encourage high standards of professionalism and performance, and,
7. participate in the professional growth and evaluation of the student.

Benefits to the Cooperating Organization

1. An opportunity to contribute to the professional development of potential future employees by providing an introduction to the agency's philosophy and policies.
2. Engagement with an individual who has chosen this field as a profession and is therefore enthusiastic and motivated to perform at a high level.
3. Potential reduction of future recruitment and training costs if the student is subsequently employed by the agency on a seasonal or permanent basis.
4. Establishment of a mutually beneficial relationship between the agency and the academic community.
5. Completion of special projects and other course-related tasks that enhance the organization's productivity.

RESPONSIBILITIES OF EACH PARTY**The Internship Supervisor in the KIN Program at OSU-Cascades will:**

1. represent the KIN Program in all official arrangements with cooperating organizations in the initiation and delivery of the Internship Program and be responsible for meeting or conferring with all organization supervisors.
2. approve and maintain current lists of all approved sites
3. assist students in the selection of a site
4. serve as the liaison between the KIN Program and the cooperating organization
5. offer to observe the student in the cooperating organization work environment, in addition to written and/or verbal communication with the student and the cooperating organization supervisor. For sites in excess of 40 miles, the supervision may alternatively consist of phone or email consultations between the KIN Internship supervisor and the student or organization supervisor,
6. assist students in the achievement of their Internship goals,
7. evaluate the student's performance in cooperation with the organization supervisor. It is the responsibility of the KIN Internship supervisor to assign the student's final grade.

The Cooperating Organization will:

1. select students for their organization using an interview or other selection process.
2. sign and return the Joint Work Agreement for Internship to the student,
3. assign a member of the organization to be the student's supervisor,
4. conduct an orientation which acquaints the student with organization's programs, policies, procedures and personnel,
5. provide the student with varied opportunities for growth and development within the scope of the cooperating organization,
6. provide the OSU-Cascades KIN supervisor with a copy of any organization-prepared training manuals or formalized work assignment description,
7. communicate regularly with the student regarding work schedules, problems, and performance,
8. communicate with the OSU-Cascades KIN supervisor, any problems that arise with the student's conduct or performance
9. conduct a standardized mid-term and final evaluation of the student and forward to the KIN supervisor. If the performance of the student is deemed unacceptable or sufficient orientation and supervision has not been provided, the OSU-Cascades KIN supervisor shall have the responsibility to terminate the experience.
10. (*optional*) provide financial assistance to the student in the form of salary, tuition assistance, housing, per diem, or other financial assistance. Financial assistance, however, is *NOT* required.

MALPRACTICE LIABILITY INSURANCE AGREEMENT

Oregon State University-Cascades has been advised that all Internship students should have professional malpractice blanket liability insurance coverage. Professional malpractice blanket liability insurance is coverage for exposure to financial claims due to "on the Internship performance" which was either provided or not provided (malpractice) which results in injury to a client or individual. OSU has contracted with Acord Insurance Company for a Student Malpractice Blanket Liability Insurance Program for coverage for one year beginning in June to insure internship students at OSU-Cascades while enrolled in an internship. OSU will provide proof of insurance coverage upon request for all internships for enrolled students. Cost per student is \$14.00 per term for KIN 410. This fee will be billed directly to the student.

OSU POLICY ON BACKGROUND CHECKS

The College of Public Health and Human Sciences is committed to the application of best practices to ensure the safety and well-being of every member of our community and the communities in which we interact. The University and other units have policies and procedures detailing criminal history checks for employees and others who are acting as agents of the University. These policies do not describe or apply to how criminal history checks will be conducted for students in internships required as part of an academic program. Therefore, this Internship Student Criminal Background Check Policy has been developed.

- The College of Public Health and Human Sciences does not routinely conduct criminal background checks on students seeking or participating in Internship experiences related to their academic programs.
- The College of Public Health and Human Sciences places the responsibility on the site for determining a student’s fitness for Internship activities based on the student’s criminal history.
- The “Site Notification of Background Check Policy Statement” (below) is to be included in all new contracts between the College of Public Health and Human Sciences and Internship sites.
- If a contract between an Internship site and the College of Public Health and Human Sciences currently exists, the site will be notified by the appropriate Internship coordinator, via email, of this policy upon the placement of new Internship students.
- If a contract between an Internship site is not required or will not be developed the site will be notified by the appropriate Internship coordinator, in writing, of this policy.

Site Notification of Background Check Policy

“It is not OSU policy to perform background checks on all OSU students, and OSU does not certify or vouch for the background of the students who participate in this experience. Accordingly, you must conduct your own background check or require the student to obtain a background check, if you would like to determine fitness for duty using that information.”

PREREQUISITES FOR ENROLLMENT IN KIN 410: INTERNSHIP

1. Completion of KIN 307 Pre-Internship (Students are encouraged to enroll in KIN 307 at least 1 quarter prior to registering for KIN 410 Internship).
2. Be in the last year (preferably last term) of program
3. KIN major coursework Grade Point Average of **2.25**
4. Cumulative Grade Point Average of **2.50**
5. Approved application for Internship (p.8) and signed Joint Work Agreement (p.9). Deliver to KIN Advisor for release of student ID to approve registration.

Internship Paperwork Requirements

The student, in cooperation with the KIN Internship supervisor, must identify a site that is appropriate for his/her interests, knowledge, skills, educational objectives and schedule. Obtaining an Internship depends entirely on an agreement between the student and the organization.

1. Prior to being granted departmental approval for registration, the Joint Work Agreement for KIN Internship (p. 9) must be completed, signed by the student and the agency site supervisor. The student then submits the form to the OSU-Cascades KIN academic advisor.
 2. If OSU-Cascades does not currently have a formal contract in place with the organization, the contract specialist for OSU-Cascades will contact the site to initiate a formal contract. However, a student may begin their hours at the discretion of the site while the contract is being formalized.
- KIN 410 Internship requires 30 hours of contact time (on-site hours) **per credit**, spread over the 10-week term, or 11-week summer term.

APPLICATION

Submit to OSU-Cascades KIN Academic Advisor prior to registering. Must be completed each term

OSU-Cascades Kinesiology Program

KIN 410 Internship

Student: _____ **Phone:** _____

Student Identification Number: _____

KIN Program Option: _____

Students' local residence:

E-mail Address: _____

Number of credits completed (including current term) _____

Term when KIN 307 was completed _____

KIN Major Cumulative Grade Point Average (see MyDegrees) _____

Cumulative Grade Point Average (see MyDegrees) _____

Term of Desired Internship _____ **Number of desired credit hours:** _____

Student Signature: _____

Submit to KIN Academic Advisor for completion of the following section:

Approved: Yes: _____ No: _____

Academic Advisor Signature: _____

Date approved: _____

JOINT WORK AGREEMENT FOR OSU-CASCADES KINESIOLOGY INTERNSHIP

Submit to OSU-Cascades KIN Academic Advisor prior to registering. Must be completed each term

A Kinesiology Internship brings together a student, an organization, and the university, each with their own responsibilities. Upon acceptance of a student by an organization, the Joint Work Agreement should be completed and signed by the student, organization supervisor, and the KIN Internship supervisor. A copy of the agreement should be retained by the student and organization, and the original filed with the KIN Internship supervisor.

To be completed by the student:

Having read the entire KIN Internship Manual, including all required assignments and responsibilities, I agree to complete all requirements necessary for the KIN 410 Internship. I will fulfill my service commitment for _____ credit hours. Understanding that each credit hour requires 30 hours of on-site contact time at my Internship location, this equals a total of _____ total contact hours.

Student's Residence during Internship:

Name: _____

Address: _____

E-mail address: _____

Phone: _____

Student's signature: _____ **Date:** _____

To be completed by the Site Supervisor:

The OSU College of Public Health and Human Sciences provides liability insurance for our students who are registered for KIN 410 Internship.

I agree to complete this student's Internship Supervision during _____ term of 20 _____.

Organization Information

Organization: _____

Supervisor's Name: _____

Title: _____

Street: _____

City, State, Zip _____

Phone: _____

E-mail address: _____

Supervisor's signature: _____ Date: _____

To be completed by the OSU-C Internship Supervisor:

Having read the prospective Internship student's proposal, I agree that this work agreement is in compliance with the Oregon State University-Cascades' Kinesiology program requirements.

➤ OSU KIN Supervisor's signature: _____

ASSIGNMENTS & GRADING

The Internship is graded A-F

The grade is determined by:

1. Completion of all course requirements
2. Final evaluation completed by organization supervisor
3. Final project evaluation completed by organization supervisor
4. Late assignments receive half-credit

Bi-Weekly Responsibilities

Every other week

Every other Sunday by 11:59 pm, you must submit a 200-300-word journal discussion entry through Canvas that answers the prompts for that submission. You will also comment on at least two other students' posts. The point is to get you reading about what others are doing and perhaps even give advice if others are struggling with something.

Additional assignments (see following pages):

By Sunday at 11:59 pm of the week indicated below, you will also complete the following assignments:

Week 1: Site requirements

Week 3: Five learning outcomes

Week 4: Final project proposal

Week 5: Mid-term supervisor evaluation

Week 7: Resume and references

Finals week: Final supervisor evaluation, student evaluation of site, final project

Week 1

By Sunday at 11:59 pm following your first week, you will submit an overview of your site responsibilities to Canvas. These should include your duties as an Internship student as well as the organization policies related to dress code, punctuality, illness (who do you contact if you're sick), etc. These must also be signed by your site supervisor so get this done early! Scan and submit via Canvas.

Example Week 1: Site Requirements

Name: Jane Professional

Date: January 7, 2019

Organization/Site: Bend Physical Therapy

Mentor/Supervisor: Dr. John Smith

Expectations & Responsibilities

- a. Clock-in 5 minutes prior to scheduled shift, clock-out no earlier than end of shift time
- b. Notify supervisor 24 hours ahead of expected absence. In the case of illness, call in as soon as possible to notify supervisor of absence.
- c. Turn on and begin setting up equipment
- d. Pull patient files for the day
- e. Confirm next day's appointments via phone call
- f. Greet all patients, check files for required paperwork.
- g. Assist PT with patients as needed (ice, heat, setting up equipment, etc)

Professionalism

PLEASE HAVE A DISCUSSION WITH YOUR SITE SUPERVISOR ABOUT WHAT PROFESSIONALISM MEANS AT YOUR SITE before they sign off on this assignment. We have had multiple situations around a lack of professionalism from our students that may have been alleviated had this conversation occurred early.

Some examples may include:

- Not eating, drinking, or chewing gum on clinic floor
- Dressing professionally, which is typically considered: close-toed shoes, no holes in pants, no jeans or athletic pants, pants and shirts that are not low-cut, no t-shirts
- Well-groomed and fragrance-free (patients/clients are often sensitive to fragrance)
- No use of cell-phones unless on lunch break
- Taking lunch break in appropriate area.
- Not having unusual/rainbow hair color
- Using professional language and behavior at all times (e.g. addressing doctors using professional titles (Dr. Johnson), and patients using Ms., Mr., Mrs., using the standard, approved greeting when answering phone and speaking with patients, and not discussing a specific treatment plan or your own personal opinions about a care plan with a patient
- Quietly observing the therapist during patient interactions, reserving questions following the visit.

Student's signature: _____/date: _____

Organization supervisor's signature: _____/date: _____

Week 3

1. Create a list of **FIVE** measurable learning outcomes that have been developed and agreed upon by you and your supervisor. These outcomes must be obtainable and able to be mastered by the conclusion of your practicum. **Bold** your action verbs. (See note at bottom of this page). Supervisor **MUST** sign-off prior to submission.

Due Date: _____

Measurable Learning Outcome

A measurable learning outcome is a description of a performance you must be able to exhibit before you can be considered competent. It describes an intended **result**, rather than a process.

Example (you need 5):

As a result of completing this Internship, the intern will be able to:

1. **Demonstrate** the accurate monitoring of blood pressure at rest, during and after exercise on a participant in a cardiac rehabilitation program.
2. **Correctly explain** to the physical therapist why he/she has chosen a particular therapeutic modality for a patient.

Three characteristics that help an outcome communicate intent.

1. **Action verb** (example above: “demonstrate” and “explain”)

An outcome always says what the learner is expected to be able to **do**. The verb describes the action that the intern will engage in.*
2. **Conditions** (example above: “at rest, during, and after exercise on a participant” and “physical therapist”). An outcome always describes the important conditions under which the performance is to occur, such as when the performance will occur and/or with whom.
3. **Criterion** (example above: “accurate” and “correctly”)

Wherever possible, an outcome describes the criterion of acceptable performance by describing how well the learner must perform in order to be considered acceptable. Other criterion levels could include: “effectively, with 75% accuracy, sufficiently, adequately,” etc.

Supervisor’s signature _____

***IMPORTANT**

When writing objectives, use ACTION VERBS. Bloom’s Taxonomy (next page) is very useful in that it categorizes learning outcomes based on a progression from the most basic levels of understanding (knowledge) through the most complex levels of understanding (evaluation). Use the following page when you write your learning objectives. The point of your experience is that you will develop real skills that rely on the application of knowledge, reflecting higher levels/orders of complexity than merely recall-based understanding. In other words, **your verbs should reflect at least comprehension-level mastery but should include at least something from the highest, Evaluation, level.**

Bloom's Taxonomy Action Verbs

Definitions	Knowledge	Comprehension	Application	Analysis	Synthesis	Evaluation
Bloom's Definition	Remember previously learned information.	Demonstrate an understanding of the facts.	Apply knowledge to actual situations.	Break down objects or ideas into simpler parts and find evidence to support generalizations.	Compile component ideas into a new whole or propose alternative solutions.	Make and defend judgments based on internal evidence or external criteria.
Verbs	Arrange Define Describe Duplicate Identify Label List Match Memorize Name Order Outline Recognize Relate Recall Repeat Reproduce Select State	Classify Convert Defend Describe Discuss Distinguish Estimate Explain Express Extend Generalized Give example(s) Identify Indicate Infer Locate Paraphrase Predict Recognize Rewrite Review Select Summarize Translate	Apply Change Choose Compute Demonstrate Discover Dramatize Employ Illustrate Interpret Manipulate Modify Operate Practice Predict Prepare Produce Relate Schedule Show Sketch Solve Use Write	Analyze Appraise Breakdown Calculate Categorize Compare Contrast Criticize Diagram Differentiate Discriminate Distinguish Examine Experiment Identify Illustrate Infer Model Outline Point out Question Relate Select Separate Subdivide Test	Arrange Assemble Categorize Collect Combine Comply Compose Construct Create Design Develop Devise Explain Formulate Generate Plan Prepare Rearrange Reconstruct Relate Reorganize Revise Rewrite Set up Summarize Synthesize Tell Write	Appraise Argue Assess Attach Choose Compare Conclude Contrast Defend Describe Discriminate Estimate Evaluate Explain Judge Justify Interpret Relate Predict Rate Select Summarize Support Value

Week 4

By Sunday at 11:59 pm following your fourth week:

1. Submit a plan for a major final project. The proposal must be approved by your organization supervisor and must include a detailed work schedule. (see sample)
-

PROJECT PROPOSAL

The final project requires the student to study a topic in depth or allows for a wide range of activities that provide an important contribution to the organization. It can be a deliverable product (brochure, website, etc) or presentation or activity (health fair, fun run, etc), or anything else that the facility would like you to work on to benefit them. Both the organization supervisor and OSU-Cascades internship supervisor will evaluate the project as part of the final grade.

Your proposal should include all of the following components

Internship Project Proposal:

1. Intern's name
2. Supervisor's name:
3. Tentative Title of Project:
4. Completion Date:
5. Purpose of the project? How does the proposed activity benefit the organization?
6. How does the proposed activity benefit the student, (i.e. what will be learned)?
7. Brief description of the proposed experience: (Detail the focus, methodology, or tasks to be performed, timeline for completion, and expected final product).

Reviewed and approved by:

Organization/Site Supervisor

Date:

OSU-Cascades KIN Internship Supervisor

Date:

Week 5

By Sunday at 11:59 pm following your fifth week:

1. Mid-term evaluation. To be completed by the organization/site supervisor and reviewed with the student. Once the review has been completed and reviewed, scan and submit to Canvas. While your midterm grade will not count towards your final grade, it is intended to provide you with a progress report and direction for the second half of your experience.
-

Week 7

By Sunday at 11:59 pm following your seventh week:

1. Submit an updated resume **that includes your Internship site** as well as a list of 3 professional references with titles and complete contact information on a separate page. YOU MUST USE ONE OF THE 3 TEMPLATES PROVIDED BY THE CAREER DEVELOPMENT CENTER to receive credit. See the **Resume Guidebook** on Canvas and/or use this link: <http://osucascades.edu/cdc>
 - a. The Career Development Center is available to assist with this. Schedule an appointment online.
-

Finals Week

By Friday at 5 pm of Finals Week, **you** must submit:

1. Your signed timesheet to Canvas
2. Your completed student evaluation of the site to Canvas
3. Your final project

By Friday at 5 pm, your **supervisor** must submit by email:

1. Your final evaluation directly to the OSU-Cascades KIN supervisor.
2. Your final project evaluation



KIN INTERNSHIP TIMESHEET

TERM: FALL ___ WINTER ___ SPRING ___ SUMMER ___ YEAR ___

Student's Name: _____

Agency Name: _____

Instructor's Name: _____

Agency Supervisor: _____

Student's email: _____

Agency Address: _____

Student's phone: _____

Agency Phone/email: _____

To the Student: In the appropriate space below, log the number of hours served each week. At the end of each month, enter the total number of contact hours and obtain your agency/organization supervisor's signature. Return completed Time sheet to instructor at the end of the term.

Week of	SUN	MON	TUE	WED	THU	FRI	SAT	Total
SUPERVISOR SIGNATURE: _____							Total Hours	

Week of	SUN	MON	TUE	WED	THU	FRI	SAT	Total
SUPERVISOR SIGNATURE: _____							Total Hours	

Week of	SUN	MON	TUE	WED	THU	FRI	SAT	Total
SUPERVISOR SIGNATURE: _____							Total Hours	

Week of	SUN	MON	TUE	WED	THU	FRI	SAT	Total
SUPERVISOR SIGNATURE: _____							Total Hours	

Total Hours of Contact for the Entire Term _____

Student Signature _____ Date: _____

**Oregon State University-Cascades
Kinesiology Program**

Internship Organization Supervisor's MIDTERM Evaluation Report

Student's Name: _____

Date: _____

Supervisor: _____

Organization/Agency: _____

Title: _____

Phone: _____

Supervisor's signature: _____

Email: _____

In order to assess the competence and effectiveness of the OSU-Cascades KIN Internship student, your evaluation as the organization supervisor is vital. Thank you for your time and commitment to our program! **Please complete the following form before the end of the 5th week, review with the student, then email this form to KINinternships@osucascades.edu.**

A. Functions related to the organization/agency.

To what extent are you satisfied with the student's ability to:

	Excellent	Good	Satisfactory	Poor	N/A
identify and conform to agency rules and regulations					
get along with staff					
utilize, on a constant basis, the skills of the staff					
be punctual and dependable					

B. Functions related to supervision

To what extent are you satisfied with the student's ability to:

	Excellent	Good	Satisfactory	Poor	N/A
follow instructions					
work without close supervision					
ask appropriate questions					
conduct him/herself professionally					
follow through and complete tasks on time					
look for responsibilities, take initiative					

C. Student's Skills and Attributes:

Excellent: Demonstrates *well developed* ability to choose and utilize a variety of skills/techniques

Good: Demonstrates *basic capacity* to utilize limited number of skills/techniques

Satisfactory: Demonstrates *ability to* recognize needed skills/technique, but cannot demonstrate skill itself.

Poor: *Does not* demonstrate skill in this area

Not Applicable: Skills/technique does not apply to Internship student

	Excellent	Good	Satisfactory	Poor	N/A
Verbal communication skills					
Written communication skills					
Ability to organize and research a problem					
Basic knowledge of the field					
Basic practical skills used in the field					
Interactions with customers/clients					
Is inquisitive					
Deals with criticism					
Works well with others					
Works independently					
Organizes time					
Accepts responsibility					

D. Areas of strength:

E. Areas needing improvement:

F. Overall, how would you rate this student's performance?

Letter Grade

Comments:

- _____ A Outstanding _____
- _____ B Exceeds expectations _____
- _____ C Meets expectations _____
- _____ D Below expectations _____

H. If this student were to apply for a position within your organization, would you recommend hiring him/her?

_____ yes _____ no Why? _____

**Oregon State University-Cascades
Kinesiology Program
Internship Organization Supervisor's FINAL Evaluation Report**

Student's Name: _____
 Supervisor: _____
 Title: _____
 Supervisor's signature: _____

Date: _____
 Organization/Agency: _____
 Phone: _____
 Email: _____

In order to assess the competence and effectiveness of the OSU-Cascades KIN Internship student, your evaluation as the organization/agency supervisor is vital. Please complete the following form, then **e-mail directly to: KINinternships@osucascades.edu**.

A. Functions related to the organization/agency.

To what extent are you satisfied with the student's ability to:

	Excellent	Good	Satisfactory	Poor	N/A
identify and conform to agency rules and regulations					
get along with staff					
utilize, on a constant basis, the skills of the staff					
be punctual and dependable					

B. Functions related to supervision

To what extent are you satisfied with the student's ability to:

	Excellent	Good	Satisfactory	Poor	N/A
follow instructions					
work without close supervision					
ask appropriate questions					
conduct him/herself professionally					
follow through and complete tasks on time					
look for responsibilities, take initiative					

C. Student's Skills and Attributes:

Excellent: Demonstrates *well developed* ability to choose and utilize a variety of skills/techniques

Good: Demonstrates *basic capacity* to utilize limited number of skills/techniques

Satisfactory: Demonstrates *ability to* recognize needed skills/technique, but cannot demonstrate skill itself.

Poor: *Does not* demonstrate skill in this area

Not Applicable: Skills/technique does not apply to Internship student

	Excellent	Good	Satisfactory	Poor	N/A
Verbal communication skills					
Written communication skills					
Ability to organize and research a problem					
Basic knowledge of the field					
Basic practical skills used in the field					
Interactions with customers/clients					
Is inquisitive					
Deals with criticism					
Works well with others					
Works independently					
Organizes time					
Accepts responsibility					

D. Areas of strength:

E. Areas needing improvement:

F. Overall, how would you rate this student's performance?

Letter Grade

Comments:

- _____ A Outstanding _____
- _____ B Exceeds expectations _____
- _____ C Meets expectations _____
- _____ D Below expectations _____

H. If this student were to apply for a position within your organization, would you recommend hiring him/her?

_____ yes _____ no Why? _____

**Oregon State University-Cascades
Kinesiology Program
Supervisor's Student Project Evaluation Report**

Student's Name: _____

Date: _____

Supervisor: _____

Organization/Agency: _____

Title: _____

Phone: _____

Supervisor's signature: _____

Email: _____

Once completed please e-mail directly to: KINinternships@osucascades.edu.

A. Project proposal

	Excellent	Good	Satisfactory	Poor	N/A
Overall presentation					
Proposal objectives were clearly stated					
Sentence structure, grammar etc.					

B. Project Benefit to Organization/Agency

	Excellent	Good	Satisfactory	Poor	N/A
Benefit to agency					
Overall presentation					
Sentence structure, grammar etc.					

C. Timelines

	Excellent	Good	Satisfactory	Poor	N/A
All agreed upon components and objectives were met					
All agreed upon timelines were met					
Project was completed on time					

Overall, how would you rate the project and its potential benefits to your organization?

- _____ A Outstanding _____
- _____ B Exceeds expectations _____
- _____ C Meets expectations _____
- _____ D Below expectations _____

Student’s Evaluation of Supervisor and Organization/Agency

Student’s Name: _____

Organization/Agency: _____

Location: _____

Supervisor(s): _____

The following evaluation tool is designed to provide us with information concerning sites for future placement. It is to be completed at the conclusion of your Internship and submitted with your final timesheet to your OSU-Cascades Internship supervisor. Your internship supervisor will not see this evaluation. Please select the response that best represents your assessment of your supervisor and the organization as a whole.

A. Supervisor Evaluation

	Excellent	Good	Satisfactory	Poor	N/A
Supervisor served as mentor and role model for me					
Supervisor was readily available for clarification or questions					
Supervisor gave me constructive criticism and guidance					
Supervisor gave me adequate feedback on projects/assignments					
Supervisor was skilled in key areas of exercise fitness					
Supervisor gave me a sense of ownership in projects/assignments					
Supervisor demonstrated effective administrative methods and techniques					
Supervisor encouraged my participation in departmental meetings/programs					
Supervisor was able to meet with me on a weekly basis					
Supervisor made sure I was oriented to the work environment					
Supervisor allowed me to make creative contributions to projects					

B. Organization Evaluation

	Excellent	Good	Satisfactory	Poor	N/A
Employees at the site worked as a team					
The site had an atmosphere of acceptance and friendliness					
I was able to network with others in the field via this position					
The projects assigned to me utilized my practical knowledge					
I learned a great deal from the major project(s) that I completed					
Working in this organization gave me an appreciation for the field					
I would recommend this site for other Kinesiology students					
This position helped me make maximum use of my academic training					

Has this experience helped you grow professionally?

_____ Yes

_____ No If no, why not:

What was your overall rating of your practicum experience?

_____ Excellent

_____ Good

_____ Average

_____ Fair

_____ Would not recommend

Comments: _____

