Please remember to register for your internship in the Registrar’s Office.
INTERNSHIP PLANNER
The purpose of this guide is to help you set up your internship. You may have already completed some of the tasks described in this guide. Use the parts you need to make your learning experience beneficial and enjoyable.

INTERNSHIP DEFINED
- An internship is a program of study involving a combination of academic work and field experience.
- Students receive credit in exchange for the work experience within a company or agency.
- During an internship, the student works closely with an employee of the organization, known as the On-site Supervisor. The On-site Supervisor will guide and evaluate the student.
- Students may be required to complete an academic requirement that demonstrates their relationship to the internship.
- Internship study is taken during junior or senior year.
- Internships must be related to academic course work in a carefully planned program of learning. They may be conducted during the fall and spring semesters, and occasionally during the summer semester.

ACADEMIC CREDIT
- Most students earn three credits for an internship experience in a semester.
- Students may apply up to 12 credits of the internship to the bachelor’s degree, with the approval of the Academic Department Head.

ACADEMIC REQUIREMENTS
- Ordinarily only students having a grade point average of 2.8 or better in their major qualify for an internship.
- On occasion exceptions may be made at the discretion of the Department Head.
- Permission is granted only to students who demonstrate maturity, academic excellence, responsibility, and high motivation.

HOURS
- Students are expected to work on-site for a minimum total of 120 hours per three credit internship. This equals approximately 8-10 hours a week for 12 to 15 weeks.
- With special permission, students can partake in 6, 9, or up to 12 internship credits. The required hours increase accordingly.
EMPLOYER EVALUATION
• A rating of your performance during your internship period will be obtained from your employer.
• The information supplied by your employer is used to provide guidance and counseling, and to assist in grade determination. The Faculty Sponsor assigns the grade.
• The Career Center sends out evaluations to employers approximately four weeks prior to the end of the semester.
• The Career Center sends a copy of the completed evaluation to the student and Faculty Sponsor.
• A three-way evaluation is suggested, using the evaluation form completed by the On-site Supervisor.

GRADING
• Internship course work will be graded by the Faculty Sponsor after evaluation procedures have been completed.
• Grades are either “Pass” or “Fail.”
• The grade does not affect the student’s GPA but will remain part of the transcript record.

COMPENSATION
• Students are not required to be paid; however if an employer chooses to grant a stipend, hourly wage, or salary, interns may accept it with the approval of the Academic Department Head.
• Students receiving financial aid (grants, scholarships, loans, college work study, etc.) administered through the College may be precluded from that aid, if they participate in paid internships.
• Students should contact the Financial Aid Office to discuss the impact this may have on their aid packages.

HOW AND WHEN TO APPLY
• Students should begin to arrange the internship at least one full semester in advance of the time work is to commence.
• Once you have determined you meet the criteria to participate in the internship program, you will need to get approval from the Academic Department Head and the Faculty Sponsor who will guide and evaluate you during your internship. You can do this by completing the INTERNSHIP PERMISSION FORM.

RESUME WRITING
• All interns must develop a resume.
• Guidelines and examples are available in The Career Resource Center on the first floor of Trinity East, and on the Anna Maria College website under “Career Resources.”
• Set up an appointment with the Career Counselor to assist you in evaluating and fine-tuning your resume.
ARRANGING YOUR PLACEMENT

There are several methods for locating internships. Before you begin this search, however, you should have a clear idea of the type of positions you are most interested in. You should also know the job setting you desire. Examples might include “working as a market research assistant within a large computer company” or “counseling and teaching abused teenagers at a residential agency,” or “paralegal within a large private law firm.”

Now you need to seek out companies that might provide internship opportunities in your areas of interest. To accomplish this you might:

• Check out the Anna Maria College website for a database on internship locations.
• Internship job descriptions are maintained in Career Services. Information might include a job description, qualifications, and information about the company.
• Read the Student Internship Evaluations. Each student that has completed an internship is asked to evaluate the strengths and weaknesses of his/her internship. These too, are located in Career Services.
• Speak with classmates who have completed internships.
• Network and use any contacts you may have made from friends, family, relatives, job fairs, etc. Keep a list of the organizations and contacts.
• Research organizations through web sites, the newspaper, telephone book, Chamber of Commerce Directory and other directories that may be more directly related to your job target.

Make a list of three to five organizations that you wish to contact. Write down the company name, address, phone number, and contact person.

The CAREER COUNSELOR CAN MAKE THE FIRST CONTACT with the employer, if you like, or you may initiate your own contacts. It is better to do this on your own because it will show initiative on your part. When you meet with the career counselor, bring your resume and completed copies of the internship “STUDENT DATA SHEET” and “INTERNSHIP PERMISSION FORM.” Both forms are enclosed in this packet. If you wish to make your own contacts, meet with the Career Counselor to discuss methods of contacting employers.

EMPLOYER INTERVIEWS

1. If the Career Counselor made the first contact for you and determined that an employer wishes to meet, you will be notified.
2. It will be your responsibility to phone the employer and arrange a mutually convenient time for an interview. You should study the “Interview Preparation” packet located on the Career Services web page or in the Career Resource Center.

AFTER THE INTERVIEW

• Write a thank you letter to the interviewer restating your interest. Express appreciation for the time and consideration given to you. A sample is available in the packet in the Career Resource Center or online on the Anna Maria College website.
• All offers deserve a reply, preferably in writing, even if you do not accept the position.
• Notify the Career Counselor immediately.
• Complete the INTERNSHIP AGREEMENT FORM. It is enclosed in this packet.
INTERNSHIP AGREEMENT FORM (enclosed)

After the student, Faculty Sponsor, Career Counselor, and employer agree on a particular placement, the Internship Agreement form must be completed. This contract identifies objectives to be achieved during the placement and a plan evaluating the learning objectives. The Internship Agreement Form must be signed by the student, the Faculty Sponsor, and On-site Supervisor.

THE INTERNSHIP AGREEMENT FORM INCLUDES THE FOLLOWING:

1. Learning Objectives: What realistic and measurable goals do you plan to achieve through the work experience?
   Examples:
   a) Becoming familiar with the field of estate administration by preparing tax forms, filling out forms with Probate Court and documenting descendent assets and debts.
   b) Gaining practical experience and knowledge of the Financial Planning Process by observing client interviews, researching financial data, and preparing financial proposals.

2. Job Description: Specifically describe the activities done to meet the learning objectives. A separate sheet may be attached to the Internship Agreement Form.
   Examples:
   a) Compile information for federal and state estate tax returns.
   b) Attend company exhibitions, answer customer questions and present product information to customers.

3. Work Schedule: Be certain to work out a schedule including at least the minimum required hours. You may work additional hours, if you wish. You may also work evenings or weekends, with the permission of your On-site Supervisor and Faculty Sponsor. If you are uncertain of your schedule, make a tentative schedule and indicate “Confirmed Schedule yet to be determined.”

4. Deadline: THE INTERNSHIP AGREEMENT FORM must be submitted, with appropriate signatures, no later than the last day to add and drop courses.

5. Placement: The internship placement is not considered complete until the Internship Agreement Form is signed by all concerned parties.

SUMMER INTERNSHIPS
• Students may take a summer internship for academic credit, provided they have a faculty member who will sponsor them during the summer.
• Be reminded, many faculty members are not on campus during the summer and may not be available for sponsorship.
• All paperwork should be submitted to Career Services prior to the end of the spring semester.

STUDENT OBLIGATIONS
• Students must fulfill the obligations outlined in the Internship Agreement.
• Students must conduct regular prompt attendance at the work site.
• Students must meet regularly with the faculty sponsor and determine the type of written research project to be completed.
• Students must complete all written work, readings, and other assignments.
STUDENTS:

☐ **Permission Form**- Signed by Faculty Sponsor, School Dean and student.
☐ **Internship Agreement Form**- Completed and signed by the Faculty Sponsor, On-site Supervisor, and the student.
☐ **Student Evaluations**- Upon completion of an internship, the student will be asked to complete an evaluation of the internship.
☐ **Internship Time Sheet**- You should keep a log of your internship hours. (A log sheet is attached)

FACULTY:

☐ **Permission Form**- Signed
☐ **Notify Registrar of Internship**
☐ **Internship Agreement Form**- Signed form with objectives of the internship, meetings, and assignments.
☐ **Supervisor Contact Sheet**- Document all meetings and contacts with the On-site Supervisor. (Submit to Career Services.)
☐ **Internship Completion (Grade Form)**- Upon receipt of the Internship Evaluation from the On-site Supervisor, complete grade form and submit to Career Services and enter a grade through the online student services website (webamc.annamaria.edu).

*Please keep copies of all forms for your records.*
INTERNSHIP STUDENT DATA SHEET

Name: __________________________________________ Campus Box: __________________________

Address: ____________________________________________________________________________

Phone: __________________________ Email: _________________________________________________

Major: __________________________ GPA: __________ Credits: __________

Internship Semester: Fall____ Spring____ Summer: ______

Areas of Interest:
_________________________________________________________________________________

Possible Site #1:

Contact Person: _________________________________________________________________

Phone: __________________________ Email: __________________________________________

Company: __________________________ Location: _________________________________

Date Contacted: ______________

Results/Notes:
_________________________________________________________________________________
_________________________________________________________________________________

Possible Site #2:

Contact Person: _________________________________________________________________

Phone: __________________________ Email: __________________________________________

Company: __________________________ Location: _________________________________

Date Contacted: ______________

Results/Notes:
_________________________________________________________________________________
_________________________________________________________________________________

(Make more copies of this form as you see fit)
Off Campus Program: Hold Harmless Waiver and Emergency Contact

Information Student – Voluntary Activity

Print Name: ___________________________________  
Student ID: ____________________________________  
Cell Phone: _________________________________  
Date: ____________________________  

Only one participant is allowed per waiver participant agreement, release and assumption of risk. 

As more fully described below, in consideration of participating in the voluntary activity of ______________________ (the “Activity”), I agree to assume the risks of injury associated with the Activity, waive certain legal rights, and release from liability Anna Maria College, its agents, owners, officers, affiliates, volunteers, participants, employees, and all other persons or entities acting in any capacity on their behalf (hereinafter collectively referred to as “Releasees”). To this end I hereby agree to release, indemnify, and discharge Releasees, on behalf of myself, my spouse, my children, my parents, my heirs, assigns, personal representative and estate as follows:

✓ I acknowledge that my participation in the Activity is voluntary and that I have other options;
✓ I warrant that I am able to safely perform the Activity;
✓ I agree to follow all applicable rules and regulations while participating in the Activity and understand that failure to do so may result in being sent home at my (or my family’s) expense, with no refund. I understand that my participation may be terminated if I am expelled from school or otherwise disciplined by school or civil authorities, or if the College, in its sole discretion, determines that my conduct is incompatible with the comfort or welfare of other students. I understand that any violation of College policy during this off campus program may have disciplinary and/or academic consequences upon my return to campus;
✓ I acknowledge that my participation in the Activity entails both known and unanticipated risks that could result in physical or emotional injury, paralysis, death, or damage to me, to property, or to others. These risks include: injury to person or property, cuts, bruises, broken bones, diseases, injury by fellow participants or strangers or animals, concussions, and even death. I fully and unreservedly accept and assume all such risks. I recognize that the College is not obligated to attend to any of my medical or medication needs and I assume all risk and responsibility for these. I give permission to the College in the case of emergency while I am participating in the Activity to provide/release any medical or other information held by the College to any person whose knowledge of the information is necessary to protect my health or safety, or the health or safety of other individuals, if there is an articulable and significant threat. In the case of a medical emergency, injury, or illness occurring during the Activity, I authorize the College to act on my behalf and at my expense in obtaining necessary medical treatment for me.
✓ I understand that participating in the Activity while under the influence of alcohol and/or drugs is strictly prohibited.
✓ I grant the College the right to photograph, videotape, and/or record me and to use my name, face, likeness, voice and appearance in connection with exhibitions, publicity, advertising, and promotional materials without reservation or limitation.
✓ I, on behalf of myself, my family, my spouse and my heirs, hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless Releasees from any and all claims, demands, or causes of action, which are in any way connected with or related to my participation in the Activity to the fullest extent permitted by law and including claims that Releasees were negligent.
✓ Should Releasees, or any one of them, be required to incur attorney fees or costs to enforce this Agreement, or as a result of my acts or omissions in connection with the Activity, I agree to indemnify them on demand for all such fees and costs as they are incurred.
✓ I certify that I have adequate insurance to cover any injury or damage I may cause or suffer while participating, and I agree to bear the costs of such injury or damage myself. I assume the risk of having insufficient insurance. I understand that if I will be using my personal vehicle as transportation during the
Activity, I am doing so at my own risk and with the assumption that my own insurance will be the primary policy used to cover any accident that might happen. I understand that to drive myself and/or other participants during the Activity, I must hold a valid driver’s license for the area in which I am driving as well as have and maintain appropriate insurance.
✓ In the event that I file a lawsuit against Releasees, or any one of them, I agree to do so solely in the state of Massachusetts, in Worcester County, in which Anna Maria College resides. I further agree that the substantive law of Massachusetts shall apply in that action without regard to the conflict of law rules of that state.
✓ I agree that if any portion of this agreement is found to be unenforceable, the remaining portions shall remain in full force and effect and the unenforceable portion will be reformed to the fullest extent permitted by law.

CAUTION: PLEASE READ CAREFULLY
By signing this document, I acknowledge that if anyone is hurt or property is damaged during my participation in this Activity, I may be found by a court of law to have waived my right to maintain a lawsuit against Releasees on the basis of any claim from which I have released them herein. I further understand that I may have to defend and indemnify Releasees, or any one of them, for costs and attorney fees as they are incurred as a result of my own conduct. Finally, I have had sufficient opportunity to read this entire document.
I have read and understood it, and I agree to be bound by its terms.
Participant’s Signature: ___________________________ Date: ___________________________
Date of Birth: ________________________

PARENT OR LEGAL GUARDIAN RELEASE AND INDEMNIFICATION (Must be completed for participants under the age of 18)
In consideration of ________________________________ (print minor’s name) ("Minor") being permitted to participate in the Activity, I, for myself, and on behalf of any other applicable spouse/parent or guardian, and on behalf of the Minor, voluntarily release, forever discharge, and agree to indemnify and hold harmless Releasees from any and all claims, demands, or causes of action, which are in any way connected with or related to my participation in the Activity to the fullest extent permitted by law and including claims that Releasees were negligent.
Parent or Legal Guardian’s Signature: ________________________________ Date: ___________________________
Print Name: ________________________________ Date: ___________________________

Emergency Contact Information
Primary Emergency Contact Information (please print clearly):
Name: ________________________________
Relationship: ________________________________
Address: ________________________________
Home Phone: ________________________________
Cell Phone: ________________________________
Work Phone: ________________________________
Email: ________________________________

Alternative Emergency Contact Information (please print clearly):
Name: ________________________________
Relationship: ________________________________
Address: ________________________________
Home Phone: ________________________________
Cell Phone: ________________________________
Work Phone: ________________________________
Email: ________________________________
Anna Maria College INTERNSHIP AGREEMENT all areas must be completed

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<th>Student Name:</th>
<th>Internship Site:</th>
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<td>Student Email:</td>
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<td>Phone:</td>
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<td>Major:</td>
<td>On-site Supervisor:</td>
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<td>GPA:</td>
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<td>Internship Credit:</td>
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| Start Date: | Completion Date: |

JOB DESCRIPTION (Be Specific. If needed a separate sheet may be attached):

MAIN LEARNING OBJECTIVE:

ACADEMIC REQUIREMENTS (PAPER, JOURNALS, PROJECT REPORTS, READING LISTS):

FACULTY/STUDENT MEETINGS (TYPE AND FREQUENCY):

SIGNATURES:

Student __________________________ Date ___________________

On-Site Supervisor __________________________ Date ___________________

Faculty Sponsor __________________________ Date ___________________

Please Note: Any default of this agreement without the consent of the signed parties may result in the termination of the student from the internship program for the semester.

*Please maintain a copy for your records.

Return to:
Career Services
Anna Maria College 50 Sunset Lane Paxton, MA 01612-1198
careerservices@annamaria.edu
Phone: 508.849.3596
ANNA MARIA COLLEGE INTERNSHIP PERMISSION FORM

NAME: ___________________________ YR. OF GRADUATION: ______________

MAJOR: __________________________ GPA: ______________

STUDENTS: You must have all three signatures

Anna Maria College wishes that its interns have a safe internship experience. Please read and abide by the following in order to promote your safety as an intern:

“I understand that during my internship I will not be identified as anything other than a student intern, and I agree not to place myself or allow myself to be placed in dangerous situations. If situations arise which could lead to my injury, I will withdraw from my internship duties immediately, and notify the career counselor and my faculty sponsor. Further, I agree to release Anna Maria College, the officers, staff, and AMC faculty of the College from all legal liability for any injury that I may sustain during the performance of activities as a student intern.”

(Signed):______________________________________ Date: ____________________

Student Signature

________________________________________________________________________

INTERNISHIP DEPARTMENT APPROVAL

This student is granted my approval to participate in the internship program for:

_______Credits during FALL _______SPRING ______SUMMER I _____SUMMER II

ACCELERATED SUMMER_________

Date:__________ Signed ______________________

Division Chair Signature

________________________________________________________________________

STUDENTS ARE REQUIRED TO HAVE A GRADE POINT AVERAGE OF 2.8 OR ABOVE to qualify for an internship, unless granted a special permission by the Division Chair. If that is the case, please indicate below: Special permission granted.

Explain:______________________________________________________________

________________________________________________________________________

________________________________________________________________________

FACULTY SPONSOR

I agree to provide faculty supervision for the above mentioned student’s internship. I will make three contacts with the on-site supervisor (in person or by phone), assess and monitor the student’s progress, and assign a final grade (PASS OR FAIL).

Date: _________________ (Signed): ________________________________

Faculty Signature
# ANNA MARIA COLLEGE INTERNSHIP TIME SHEET

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Internship Credits: ____________________ Total Hours Completed: ________________

(*120 hours are required for every 3 credits)

Signed: ___________________________ Date: ___________________________

Student

Signed: ___________________________ Date: ___________________________

Internship Supervisor
Career Services
Anna Maria College
50 Sunset Lane Paxton, MA 01612-1198
Phone: 508.849.3596
careerservices@annamaria.edu
www.annamaria.edu/careerservices