

INTERNSHIP REGISTRATION

(For students who are seeking academic credit)

Instructions for Internship Registration

1. Select internship position (work with department faculty).
2. Internship must be approved by the Dean or Department Chair of the department from which you wish to receive academic credit.
3. Attach a complete syllabus provided by CBU faculty instructor.
4. Submit completed Internship Registration packet to the Registrar's Office **within thirty (30) days of the beginning of selected semester or summer term.**
5. Internships **must** be completed within the semester that has been selected.

Student Name

CBU ID#

Semester/Year

Daytime Phone Number (with area code)

Internship Paperwork Due Date

Major	Course #	Employer	Units	Faculty Instructor

- ➔ A syllabus (provided by your faculty instructor) **MUST** be attached. If a syllabus is not attached, this form will be returned to the student.
- ➔ An internship job description from your internship site **MUST** be attached. The job description should state the overall intern responsibilities, expected duration, and expected hours per week on site. You will need this to obtain faculty approval for academic credit.
- ➔ All documentation must be submitted within thirty (30) days of the beginning of the selected semester. If you plan to drop a course in order to enroll for an internship, you must do so by the "Last Day to Drop a Class with a Refund" deadline.
- ➔ **Students cannot register for internship(s) through web registration.** Registrar can only complete registration for an internship upon receipt of necessary documents.

Faculty Instructor Signature/Date

Dean/Department Chair Signature/Date

Registrar Signature/Date

ACADEMIC INTERNSHIP & COOPERATIVE EDUCATION STUDENT APPLICATION FORM

First Name:	Last:	MI:	Student I.D.#	Date:
Current Address:		City:	State:	Zip:
Permanent Address:		City:	State:	Zip:
Local Phone:	Permanent Phone:		Graduation Date:	
E-Mail Address				
Major:			Minor or Emphasis:	
Class Level:	<input type="checkbox"/> Junior	<input type="checkbox"/> Senior	<input type="checkbox"/> Graduate	
Type of Internship or Career Interest(s):				
Semester(s) for Internship: <input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> Summer				

This academic program is a vital part of your learning experience and must be considered as important as your classes. The University has specific expectations required for your participation. Please read carefully and sign.

I understand and agree that for each internship/cooperative position I obtain, I must complete all required documentation, such as a "Learning Agreement" and Evaluation Forms supplied the Career Services Office. I also understand that my Site Supervisor will complete an evaluation on my performance and that information will become a part of my permanent records. If I choose to receive academic credit for an internship, I understand that the Faculty Instructor will have access to the above-referenced evaluation and will also submit a grade for this experience, becoming a part of my permanent records. Additionally, I will report any information regarding problems and/or circumstances regarding the status of positions so that they can be corrected. I understand that to not comply with the above expectations, I could lose my privileges for future internship/cooperative education opportunities.

Signature _____

Date _____

FOR OFFICE USE ONLY

Notes/Referral Information:

Employer:

Title:

Address:

Phone:

Internship Cooperative Education Credit No Credit



INTERNSHIP LEARNING AGREEMENT

Individual Internship for _____
Semester/Year

Student I.D. _____ Name _____
Last First Initial

Declared Major _____ Class Level (Jr., Sr., etc.) _____

Address _____ Telephone () _____

Instructor's Name _____ Subject Area _____ Number of Units _____

Name of Company _____ Site Supervisor _____

Address _____ Telephone () _____

Start Date: _____ End Date: _____ Compensation (if any) _____

Agreed hours per week: _____ Internship Position Title: _____

Please attach a copy of your internship job description PRIOR to signing off on this page.

Student's Signature _____ Date _____

Internship Site Supervisor _____ Date _____

The syllabus for this course and the internship job description has been reviewed with the student: Yes

Faculty Instructor's initials: _____

I certify that this program meets academic guidelines:

Dean/Department Chair's Signature _____ Date _____

Academic Faculty Instructor's Signature _____ Date _____

- Cc: Faculty Instructor
- Dean/Department Chair of Declared Major
- Career Center Staff Member
- Registrar's Office

COMPANY/ORGANIZATION APPLICATION

(Please type or print clearly)

Company/Organization: _____

Address: _____

City: _____ Zip: _____

Phone: _____ FAX: _____

Contact Person: _____ Title: _____

Email Address: _____ Web Site Address: _____

1. Check one: We are a for-profit organization We are a charitable, non-profit organization

2. Site Agreement – Please sign and date the following:

We intend to host a CBU student intern and are in accordance with the following Statement of Non-Discrimination:

We are an employer with whom employment is based solely upon qualification to do the work for which hired without discrimination on account of any factor prescribed by law including race, age, color, national origin, sex, handicap, ancestry, disability, marital status or any other unlawful basis.

Company/Organization Representative: _____ Date: _____

3. Internship Position Title: _____

4. Briefly describe your company/organization:

5. Number of employees: _____



DR. ROBERT K. JABS

School of Business

ACADEMIC INTERNSHIP PROGRAM CRITERIA

Definition:

An internship is a form of experiential learning that integrates knowledge and theory learned in the classroom with practical application and skills development in a professional setting. Internships give students the opportunity to gain valuable applied experience and make connections in professional fields they are considering for career paths; and give employers the opportunity to guide and evaluate talent.

Criteria:

To ensure that an experience—whether it is a traditional internship or one conducted remotely or virtually—is educational, and thus eligible to be considered a legitimate internship, all the following criteria must be met:

1. The experience must be an extension of the classroom: a learning experience that provides for applying the knowledge gained in the classroom. It must not be simply to advance the operations of the employer or be the work that a regular employee would routinely perform.
2. The skills or knowledge learned must be transferable to other employment settings.
3. The experience has a defined beginning and end, and a job description with desired qualifications.
4. There are clearly defined learning objectives/goals related to the professional goals of the student's academic coursework.
5. There is supervision by a professional with expertise and educational and/or professional background in the field of the experience.
6. There is routine feedback by the experienced supervisor.
7. There are resources, equipment, and facilities provided by the host employer that support learning objectives/goals.

Please note that California Baptist University faculty approve internship proposals for academic credit based on the above criteria and the objectives of their course syllabi.

**This language was adopted by the Faculty Internship Advisory Board August, 2011, from the Position Statement released July, 2011 by the National Association of Colleges and Employers' Principles for Professional Practice Committee.*