INTERNSHIP

Definition

A student Internship is a type of “Work Based Experience Learning Program” for high school students who have completed extensive school based preparation relating to an identified area of career and academic interest in the Individual Learning Plan. Internships are usually one time experiences which should lead to course credit and/or pay.

Rationale

Internships give students opportunities to explore careers via workplace learning experiences. Students have opportunities to learn about the world of work and to develop useful skills and attitudes. Through the demonstration of workplace skills, the academic competencies needed to be successfully employed will also be highlighted, which may in turn result in increased motivation to learn academic subject matter.

Internship is just one type of work-based learning experience. One of the major purposes of internship is the opportunity to gain exploration experiences in one or more careers. While students intern at a work site, they probably will not be there long enough to gain a great deal of skill at the position.

Internship is longer than job shadowing but different from cooperative education work experience in several ways. Cooperative education places a student for a longer, often year-long, work experience to gain or expand skills at that job. Cooperative education students are paid for their work; internship students may or may not be paid, depending on the length of their work experience.

Steps in Planning an Internship Program

1. Identify and develop goals, policies and procedures for the internship programs.
2. Develop selection criteria for student participation and internship mentors.
3. Work with community to identify prospective sites for student internship experiences.
4. Publish information in school handbook.
Structure

The structure of internship experiences consists of a combination of classroom instruction and field experiences. Students are to spend designated time in the classroom/seminar on a regularly scheduled basis. A Work-Based Learning Plan/Agreement (See Appendix A, Forms, for a sample.) is to be developed with a specific set of competencies agreed upon by the school and workplace personnel. The field experience is to be designed to address these competencies and class time is provided for instruction and monitoring all aspects of the program.

Content for the seminar will relate to competencies needed for success in the internship experience. Some sample topics are:
- Employability skills (e.g., business correspondence, etiquette, goal setting, résumés, job application, dress codes, proper attire, ethics, etc.)
- Review of Individual Learning Plan (e.g., career interest, job description, education skills necessary for various career)
- Protocol in using technology (e.g., cell phones, email, and other technology at the worksites)
- Confidentiality
- Use of time (policies and procedures)
- Other:

Criteria for Paid and Nonpaid Internship

**Paid:** Students who are to receive pay for an internship experience are those participating in an experience that is a semester or longer and have an established employer-employee relationship. (See Chapter 1, Legal Issues, of this manual for what constitutes an employer-employee relationship.) Additional information is available on page 4-3.

**Non-Paid:** Non-paid students are those individuals who participate in an internship experience on a short-term basis. An employer-employee relationship must meet the guidelines identified in 803 KAR 1:005 (Chapter 1, Legal Issues, of this manual. Students interning in a not-for-profit organization may also qualify for non-paid internship.

Short-term/Long-term Internship

**Short term:** student participation on a short-term basis may vary from one day to a month contingent upon a student’s objective and if an employer-employee relationship is not established.

**Long term:** Long-term internship may be established for one semester or one year with an established employer-employee relationship.
Program Offerings

Internship may be a component of a student’s schedule during:
   a) the regular school day
   b) after school hours
   c) during the summer

Each local school or Area Technology Center may choose to implement an after-school or summer program. All legal and curricular requirements must be met; specifically, the requirement for on-site supervision. The educational agency must provide properly qualified staff and supervision.

Credit/Performance Standard and Compliance Issues

The amount of credit to be awarded to students for internship and related course/seminar is determined at the district level according to the district’s standards for seat time (Carnegie Unit) requirements or performance-based standards.

Legal/Liability and Compliance Issues

Districts and Area Technology Centers providing internships are to:
--Comply with state and federal labor laws (See Chapter 1, Legal Issues).
--Make determination if internship experiences meet guidelines for qualifications for paid and non-paid internships. In determining if an internship should be paid, a school must determine if an employer-employee relationship has been created. If all six of the following criteria apply, the trainees or students are not considered employees within the meaning of KRS Chapter 337 and are not required to be paid. The criteria for determining if employer-employee relationships exist are as follows:

   a. The training, even though it includes actual operation of the facilities of the employer, is similar to that which would be given in a career and technology center;
   b. The training is for the benefit of the trainees or students;
   c. The trainees or students do not displace regular employees, but work under their close observation;
   d. The employer that provides the training derives no immediate advantage from the activities of the trainees or students and on occasion his operations may actually be impeded; special attention and consideration of this criteria is crucial in determining if trainees or students must be paid;
   e. The trainees or students are not necessarily entitled to a job at the conclusion of the training period; and
   f. The employer and the trainees or students understand that the trainees or students are not entitled to wages for the time spent in training.
CHAPTER 4: INTERNSHIP

As best practice, policy statement(s) regarding off-campus experiences for work-based learning should be components of the curriculum outlined by the School Based Decision Making Council (SBDM).

Student Insurance

One consideration teachers/coordinators must consider when beginning an internship program is that of student insurance (accident and liability). In most instances, if the program is an established part of the high school or Area Technology Center approved by SBDM and local school board, students would be covered. If students involved in an internship placement which results in a paid internship and the employer/employee relationship has been established, the student would be covered by workmen's compensation. Consult with your Central Office Administration or the school board attorney for confirmation regarding student internship insurance coverage.

Background Checks for Work-Site Mentors

School districts should have policies in place for volunteers and/or other persons directly working with students. Each internship program/school should follow district policies as they relate to background checks for personnel directly working with their students. It is recommended for program planners to consult with the high school or area technology center principal, central office personnel and/or school board attorney for clarification.

Program Development

Internships are an important part of the student’s work-based learning programs, and all parties involved should be aware of program policies and procedures. It is advisable that program coordinators make each School Based Decision Making Council (SBDM), advisory council and school board aware of Work-Based Learning program policies and procedures on a regular basis. School councils have the authority to make curricular and policy decisions to meet each school's individual needs as it relates to internship and Work-Based Learning programs.

Once programs are approved at the school and district level, program coordinators should verify with each school board the liability coverage in place for internship students.

Professional Staff Criteria

An internship program may have both a certified teacher for the classroom section of the program and a coordinator for worksite supervision section. (The coordinator may or may not be a certified teacher but must work under the supervision of a teacher.)
Role of Teacher/Coordinator

As supervisor of the program, the teacher or coordinator generally will:

- Provide information about the program to students, parents/guardians, and employers.
- Keep the school and community informed regarding the all aspects of the program.
- Set up an advisory council to promote internships and to involve parents and business leaders in the design and implementation for the program.
- Identify potential internship sites, contact persons, and hosts.
- Visit training sites to meet personnel, observe the work performed at the work-site, and check for appropriate safety practices and safety training.
- Provide orientation for parents/guardians and students.
- Select dates for internship experiences.
- Guide the student in researching background on the company/industry.
- Develop appropriate forms, such as Parent/Guardian Consent Form and Student/Teacher Consent Form, in conformity with school policies.
- Work with students in selection of their placements, considering student interests, personality of students and hosts, and other factors.
- Develop a Work-Based Learning Plan/Agreement in consultation with the student and the employer. (See sample plan in Appendix A, *Forms*.)
- Orient work-site personnel to policies, procedures, and guidelines.
- Teach students appropriate dress and behavior skills.
- Make transportation arrangements.
- Identify and coordinate insurance and liability issues.
- Collaborate with teachers if students are to miss a class.
- Observe students at their sites.
- Stay in contact with employers.
- Integrate the student’s work-site learning with school-based learning through seminar/class instruction.
- Provide recognition and appreciation for business/industry and school personnel involved in the program.

Curricular Component of Work-Based Learning Experiences

Individual districts and local SBDM councils may decide the extent and length of coordinating classroom seminar experiences affiliated with their internships. Examples may include, but are not limited to, the following options:

- Semester course covering workplace issues and/or other specifics of the field of interest, in conjunction with the work-based learning experience or having work experience continue after the conclusion of the semester course.
CHAPTER 4: INTERNSHIP

• Seminar one day per week throughout the course of the work-based learning experience.

Integration of ILP Components

The Individual Learning Plan can be used in a variety of ways to aid in planning and carrying out the internship and related course instruction/seminar:

• Career Matchmaker can be used to identify areas of career interest for internship placement.
• The four-year planning tool on the ILP can be used to identify four-year course pathways that can lead to internship placement
• Several functions of the ILP can be used to explore career settings, educational requirements, sample work schedules, interviews with people in careers, advice for students interested in careers and income information. This can be the basis of several classroom lessons.

Work-Based Learning Plan/Agreement

A Work-Based Learning Plan/Agreement needs to be developed for each participating student. It should include the responsibilities of the work-site mentor, student, and school system. It is to identify what each party will contribute and receive from the experiences. Individual teachers may develop standards/rubric for student assessment. A system needs to be developed for student accountability (e.g., sign out from school and sign in at worksites). The system needs to provide accountability measures for supervising and mentoring the program.

Forms

Work Based Learning Plan/Agreement (Appendix A, Forms)
Internship Employer/Supervisor/Mentor Evaluation (page 4-16)
Medical Consent Form (to be used if no other medical consent is in place—page 4-14)
Sample Parent/Guardian Consent Form (page 4-13)
Sample Employer Evaluation Report (page 4-19)

Resources


Additional resources in Appendix B, Resources.
SAMPLE
MEDICAL AUTHORIZATION
Division of Career and Technical Education
Office of Career and Technical Education

Should it be necessary for my child to have medical treatment while participating in the internship, I hereby give the school district and/or work-site personnel permission to use their best judgment in obtaining medical service for my child, and I give permission to the physician selected to render whatever medical treatment he/she deems necessary and appropriate.

____ Yes  ____ No

Permission is also granted to release emergency contact/medical history to the attending physician or to work-site personnel if needed.

____ Yes  ____ No

Student's name_________________________________________________________
Date of birth  __________________________________________________________
Address _______________________________________________________________
Daytime phone for parent or guardian (_____)
Contact other than parent or guardian _______________________________________
Relation to student ______________________________________________________
Phone (___)___________________________________________________________
Family doctor __________________________________________________________
Doctor's Phone (_______)_________________________________________________
Preferred hospital address _________________________________________________
Preferred hospital phone (____)___________________________________________

Does your child require any special accommodations due to medical limitations, allergies, disabilities, dietary constraints, or other restrictions? Please explain any that are required.

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

_______________________________________________________
Signature of Parent/Guardian                                     Date

This form was adapted from Job Shadow Guide for Staff, Northwest Regional Educational Laboratory.
SAMPLE  
STUDENT/TEACHER CONSENT FORM  
Division of Career and Technical Education  
Office of Career and Technical Education  

Student to Complete:  

I, _______________________ will participate in an internship experience, which  
will take place at ___________________________ on ________________________________ (day, month, year)  
from ____________a.m./p.m. to ___________ a.m./p.m.  

I understand that people outside of school are giving valuable time to help me learn about their jobs. By  
signing below, I agree to complete all the requirements of the internship and take responsibility for making  
up work in the classes I miss for my internship experience.  

____________________________________________            _______________________  
(Student Signature)                                                                    (Date)  

Teacher(s) to complete:  

I authorize _____________________ (name of student) to be excused from my class to participate in  
internship during the date and time indicated above. The student will be responsible for all make-up work  
and will complete it according to a schedule that I determine with him or her.  

1. Teacher’s name: _____________________________________________________________  
   Dates/times of classes to be missed: ___________________________________________  
   Signature: __________________________________________________________________  

2. Teacher’s name: _____________________________________________________________  
   Dates/times of classes to be missed: ___________________________________________  
   Signature: __________________________________________________________________  

3. Teacher’s name: _____________________________________________________________  
   Dates/times of classes to be missed: ___________________________________________  
   Signature: __________________________________________________________________  

4. Teacher’s name: _____________________________________________________________  
   Dates/times of classes to be missed: ___________________________________________  
   Signature: __________________________________________________________________  

Adapted from *Job Shadow Guide for Staff.* Northwest Regional Educational Laboratory.
SAMPLE

INTERNSHIP SITE SUPERVISOR/MENTOR EVALUATION
Division of Career and Technical Education
Office of Career and Technical Education

Internship Site:______________________________________________________

Site Supervisor/Mentor:______________________________________________ Date:______________

Thank you for participating in an internship experience with our students. Please complete this brief evaluation of your experience so we can continue to improve our program.

Please rate the following on a scale of 1 to 5 (1 indicates you strongly AGREE with the statement, and 5 indicates you strongly DISAGREE).

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Agree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>I was well prepared by school staff to be a host.</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>As a result of this experience, I gained a new perspective of my job.</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>I was at ease interacting with the student(s) during the internship.</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>In my opinion, the internship was a worthwhile learning experience for the student(s).</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>I enjoyed the experience and would be willing to do it again.</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
</tbody>
</table>

For successful internship experiences in the future:

1. What should we continue to do?

2. What should we change?

3. How could we better support you throughout the experience?

4. How would you rate the internship program?
   a. Excellent _____       c. Good _____
   b. Average _____       d. Fair _____

Any additional comments?
SAMPLE
STUDENT INTERNSHIP, SELF-EVALUATION
Division of Career and Technical Education
Office of Career and Technical Education

Intern: ___________________________ Date: ________________
Internship Site: ____________________________________________
Site Supervisor/Mentor: ______________________________ Title: ________________

Reflections

1. Describe the worksite where you worked.

2. To what career cluster did your internship relate?

3. What kinds of activities did you observe during your internship?

4. What did you like most about your internship?

5. What did you like least about the internship experience?

6. Did your internship experience change your perception of this career? Why or why not?

7. Did you learn anything new about this career? If so, what?

8. Would you consider a career in the field you observed? Why or why not?

9. How can the internship programs be improved?

10. How would you rate your internship experience?
    Excellent _____  Good _____
    Average _____  Fair _____

4-10 Work-Based Learning Manual 2008
SAMPLE

Work-Based Learning (WBL) Employer Evaluation
Division of Career and Technical Education
Office of Career and Technical Education

☐ Coop ☐ Internship ☐ Mentoring ☐ Shadowing ☐ School Enterprise ☐ House Project

School: ___________________________ Program: ___________________________

Student Name: ______________________ WBL Start Date: ________________

Company Name: ____________________ WBL End Date: ________________

Contact Person: ____________________ Telephone: ____________________

Evaluations shall be performed for each grading period.

• **Student Responsibility** – Turn in this form to the teacher/coordinator at the end of each grading period.

• **Employer Responsibilities** – Please complete Table I and Table II below. Share your ratings with the student. Give this form to the student to return to the WBL Teacher/Coordinator. Thank you.

### Table I

**Evaluation**

<table>
<thead>
<tr>
<th>Scale</th>
<th>1 – Poor</th>
<th>2 – Needs Improvement</th>
<th>3 – Average</th>
<th>4 – Good</th>
<th>5 – Excellent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trait</td>
<td>Rating</td>
<td>Trait</td>
<td>Rating</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Attendance/Punctuality</td>
<td>1 2 3</td>
<td>Adaptability/Flexibility</td>
<td>1 2 3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Appearance</td>
<td>1 2 3</td>
<td>Relations with Co-Workers</td>
<td>1 2 3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Attitude</td>
<td>1 2 3</td>
<td>Time Management</td>
<td>1 2 3</td>
<td></td>
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<tr>
<td>Dependability</td>
<td>1 2 3</td>
<td>Quality of Work</td>
<td>1 2 3</td>
<td></td>
<td></td>
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<tr>
<td>Initiative</td>
<td>1 2 3</td>
<td>Company Rules/Regulations</td>
<td>1 2 3</td>
<td></td>
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</tr>
<tr>
<td>Following Directions</td>
<td>1 2 3</td>
<td>Safety</td>
<td>1 2 3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Job Knowledge</td>
<td>1 2 3</td>
<td>Use of Equipment</td>
<td>1 2 3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cooperation</td>
<td>1 2 3</td>
<td>Other________________________</td>
<td>1 2 3</td>
<td></td>
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</tr>
</tbody>
</table>

**Remarks:** ___________________________

### Table II

**Attendance**

<table>
<thead>
<tr>
<th>Day</th>
<th>Mon</th>
<th>Tues</th>
<th>Wed</th>
<th>Thurs</th>
<th>Fri</th>
<th>Mon</th>
<th>Tues</th>
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<th>Fri</th>
<th>Total hours</th>
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<tbody>
<tr>
<td>Date</td>
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**Hours Worked**

<table>
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<th>Date</th>
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</tr>
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</table>

**Earnings (If Applicable)**

Total Hours: ________ X Hourly Wage: ________ = Total Gross Earnings: $__________

Signature of Work-Site Mentor: ___________________________ Date: ____________________