

# Summer 2024 Internship INT 200 Enrollment Checklist

Completed Student Learning Agreement and all required documents must be submitted to the Hameetman Career Center (HCC) via email at <a href="mailto:careers@oxy.edu">careers@oxy.edu</a> on/before <a href="mailto:Wednesday">Wednesday</a>, <a href="mailto:June 26">June 26</a>, <a href="mailto:2024">2024</a>. The HCC will process INT enrollment upon receipt of all required documents and fields (indicated on the checklist below).

There will not be any late Student Learning Agreements accepted.

#### Complete INT 200 Packet Includes:

| 🖵 [Inte | rnational Internships Only] Completion of Mandatory Travel Clearance (Page 2)      |
|---------|--|
| List I  | INT 200 Start and End Dates (Page 3)   |
| 🖵 Com   | plete Internship Site Information (Page 3)   |
| 🖵 Com   | plete Learning Objectives & Strategies for Completing Learning Objectives (Page 4) |
| 🖵 Sign  | ed Student Learning Agreement (Page 4)   |
| 🖵 Inter | nship Supervisor Signature (Page 4)  |
| Acad    | demic Component Proposal (Page 5)  |
| 🖵 Facu  | ulty Supervisor Signature (Page 6)   |
| 🖵 Sign  | ed Student Waiver of Liability and Assumption of Risk (Pages 7 and 8)              |
| 🖵 Inter | rnship Job Description or Posting  |
| 🖵 Inter | nship Offer Letter   |
| 🖵 [Sun  | nmer Only] Office of the Registrar – Summer Registration Form (Page 10)            |

#### Submitting Forms Electronically

Students remain responsible for collecting the necessary signatures for any forms they are submitting. Career Services can not process a request without the necessary approval(s). Please note the following:

Students are expected to complete the form and send it to the relevant internship and faculty supervisors for approval. Approvers can then electronically sign the document and return the form as an attachment to the student. Alternatively, your internship supervisor can provide their approval via email.

Once the INT 200 Student Learning Agreement is complete (including internship supervisor signature, job description, offer letter, and Summer Registration Form, if applicable), send all documents in one email to the Hameetman Career Center at careers@oxy.edu.

## **International Internships**

Students who secure a paid or unpaid internship outside of the United States and wish to earn credit through the INT course must complete a **Mandatory Travel Clearance**. This includes any international student who may be completing an internship in their home country, but wishes to enroll for INT 200 course.

#### **Mandatory Travel Clearance**

Oxy students who participate in research projects, community placements or project abroad (not domestic) must complete the <a href="Oxy Global Projects Clearance">Oxy Global Projects Clearance</a> a month prior to departure. In the online travel clearance, you will be asked to complete the following:

- 1. Agreement to Participate
- 2. Health Report
- 3. Travel Clearance Questionnaire
- 4. Any Other Required Documents (i.e. Scanned Passport, IRB Approval, Host Agreement Form)
- 5. Agreement to Pay the Clearance Fee

Students who do not complete the Travel Clearance through the International Programs Office (IPO) will not be eligible to enroll in the INT course.

#### Contact IPO with any questions:

McKinnon Center for Global Affairs, Johnson 102, Phone: (323) 259-2533, ipo@oxy.edu



Check if Remote

#### **INTERNSHIP INT COURSE - SUMMER 2024**

SUMMER REGISTRATION BEGINS April 22, 2024
DEADLINE TO ENROLL IS June 26, 2024
NO EXCEPTIONS

## **INT 200 Student Learning Agreement**

Occidental College's Career Services office must approve all internships for enrollment in INT 200. All students enrolled in INT 200 must participate in a final reflective and evaluative component with Career Services. Students can only be registered for one (1) internship course per semester and must have a cumulative GPA of 2.00 or better at the time of application for enrollment. Internship hours completed for the INT 200 course credit cannot be used for any other OXY course. Students may not exceed a total of four (4) INT 200 internship units during their entire matriculated time at Occidental College.

To enroll, the INT 200 Student Learning Agreement must be completed and submitted to Career Services along with the Student Waiver of Liability and Assumption of Risk, job description, offer letter, and Summer Registration Form (if applicable). Student internship must be at least 80 hours over the course of the semester and students must enroll in INT 200 during the semester that the internship is completed. Retroactive enrollment will not be approved and credit will not be given in cases where an internship has been completed.

Submission of an INT 200 Student Learning Agreement and supporting documents is mandatory for every internship semester (even if the site remains the same). It is recommended that students keep a copy of all submitted enrollment forms for their records.

All International Internships require a mandatory travel clearance. See International Internships section on Page 2.

| SUMMER TERM DATES: M                         | ay 28, 2024 - August 2, 2024   |           |            |                  |                     |  |
|--|--|-----------|------------|------------------|---------------------|--|
| Internship Start Date:                       | Internship E   | nd Date:  | Но         | ours per week: _ |                     |  |
| A. STUDENT INFORMATIO                        | N (Please Print)   |           |            |                  |                     |  |
| Name:  | Fi   | rst       | I.D.#      |                  | Semester/Year       |  |
| Address:(During the internship)              | Street/PO Boy  |           | y/State    | Zip (            | Dxy Box #           |  |
| (Burning the internaling)                    | GREEN & BOX  | On,       | youto      | Δίρ .            | олу вол н           |  |
| Email:                                       | Phone:   | c         | lass Year: | Major:           |                     |  |
| Compensation provided for I                  | Compensation provided for Internship:   Yes  No If Yes, provide amount:  per(hour, week, etc.) |           |            |                  |                     |  |
| B. INTERNSHIP SITE INFO                      | RMATION (Please Print) *   |           |            |                  |                     |  |
| Organization:(Name will be reflected on your | transcript)  | Phone:    | Web:       | lr               | nternship Position: |  |
|  | ,  |           |            |                  |                     |  |
| Internship Supervisor:                       | Name   | Title     |            |                  | Email               |  |
|  |  | ride      |            |                  | LIIIaii             |  |
| Address (Required):                          | Street/PO Box  | City/Sta  | ate        |                  | Zip                 |  |
|  |  | 2.1.97010 |            |                  | г                   |  |

#### C. STUDENT LEARNING OBJECTIVES (Please print and/or attach responses)

The internship supervisor, faculty supervisor, and student should mutually agree upon the objectives and responsibilities outlined in this document. It is recommended that you consult your Internship Supervisor when completing this section. Learning Objectives outlined here can serve as a basis of the student's internship grade.

| <b>Learning Objectives (LO): Please articulate below what you</b> Learning Objectives provide information to the internship superperforming the tasks required of the internship). <b>See Writing Learning Learning Control</b>   | visor to assure that you are acquiring knowledge a  | nd skills that <i>you</i> wish to learn (in addition to  |
|---|---|--|
| LO1   |   |  |
| LO 2  |   |  |
| LO 3  |   |  |
| How does the internship relate to your academic program of stu  | udy and professional development?   |  |
|   |   |  |
| Strategies for Completion of Objectives (SCO): How will you departments to meet with or shadow etc. (please attach formal   |   | s, readings, reports, meetings, people or  |
| SCO for 1   |   |  |
| SCO for 2   |   |  |
| SCO for 3   |   |  |
| I agree to complete all work, assignments and learning objective relevant organizational policies, procedures and functions and to my internship supervisor if I decide to drop the internship. I will complete required forms and submit necessary documercorded. Credit cannot be issued until ALL required documents.  | o appropriate standards of ethical conduct. I am of<br>If needed, I must withdraw from the course thronents, including a reflective essay and internsh  | oliged to notify the Career Services office and ough the Registrar's Office by June 25, 2024.  |
| Student Signature   | Please Print  | Date   |
| Please notify the Career Services office if any difficulties are e or performance in the internship.  | experienced with the site or if any health or medical   | conditions occur that might affect your placement  |
| Internship Supervisor Please note that the following is required of all organization  a) Confer regularly with the intern and their faculty supervisor  b) Train the intern as required and orient them to the orient them to the orient them to the orient them to the orient the intern as years and space available and work schedule that can accommode e) Make available any materials that the intern has produce the intern's performance).  f) Provide the Career Services office with a final writter to the Faculty Supervisor. The final evaluation is due to the Faculty Supervisor. The final evaluation is due to the Faculty Supervisor. The final evaluation is due to the Faculty Supervisor. The final evaluation is due to the faculty Supervisor. The final evaluation is due to the faculty Supervisor. The final evaluation is due to the faculty Supervisor. The final evaluation is due to the faculty Supervisor. The final evaluation is due to the faculty Supervisor. The final evaluation is due to the faculty Supervisor. The final evaluation is due to the faculty Supervisor. | ervisor and/or the Career Services office.  Iganization's policies and procedures.  Igaliable for the intern.  Idate the intern's academic responsibilities (if applicate the intern's academic responsibilities (if applicate the organization for review by the faculty performance evaluation of the intern's work. Care by August 2, 2024.  I until ALL paperwork and required evaluations ated and assigned work components which appear | able). supervisor as an additional basis for grading er Services will record the form and submit them are received. on this agreement. I concur with the stipulations of |
| Internship Supervisor Signature   | Please Print  | <br>Date   |

#### E. ACADEMIC COMPONENT - ASSIGNMENTS AND SIGNATURES

To further enhance the experiential learning of the internship by connecting it to a student's academic goals and interests, INT 200 has an academic component designed in collaboration with a faculty supervisor.

INT 200 students must secure an on-campus faculty supervisor to assign, supervise, and approve the proposed academic component of the internship. The faculty supervisor must be a full-time faculty member on campus. Students are expected to meet with their faculty supervisor at least three (3) times over the course of the semester (or summer session) and spend at least 20 hours during the term working on the academic project in addition to the required internship minimum of 80 hours per semester.

Students must submit a proposal for the academic component to the HCC along with their INT 200 Student Learning Agreement. The proposal for the academic component must include:

| cription of work  | already completed in the field and/or previous experience relevant to the project |
|-------------------|---|
| pposed plan/me    | nod of research or specific education goals for this project                      |
|                   |   |
| chedule of studer | t/faculty meetings as part of this academic component                             |
|                   |   |
|                   |   |
| ssignments(s) or  | project(s) to be evaluated for the grade  |

#### **Faculty Supervisor**

The spaces above indicate what assignments, projects, or scope of learning you will add to the student's internship experience (e.g., journals, small-scaled research, weekly or bi-weekly meetings, etc.) The general objectives of the meetings are to clarify goals and activities, to make a general assessment of work done and to make a midpoint and final evaluation. If distance makes it impossible for on-site meetings, phone calls or emails may be substituted for on-site meetings. Faculty supervisor must be a full-time faculty member at Occidental. If the faculty supervisor is an adjunct instructor, faculty must receive approval from the Department Chair.

| I concur with the stipulations of this agreement. I further agree to be available to meet with the student to discuss the internship experience, to evaluate the student's learning and when appropriate, and to converse with the internship supervisor. I have reviewed the Primary Learning Objectives with the student. |  |                                    |  |  |  |  |
|---|--|------------------------------------|--|--|--|--|
| Faculty Supervisor Signature  | Please Print                                     | Date                               |  |  |  |  |
| F. HAMEETMAN CAREER CENTER STAFF ONLY  I agree with the stipulation of the agreement. I further agree appropriate to visit the site and/or converse with the Internsh   |  | ne internship experience, and when |  |  |  |  |
| Career Services Signature   | Please Print                                     | Date                               |  |  |  |  |
| Cumulative G  |  |                                    |  |  |  |  |
| (2.00 0   | r better is required at the time of application) |                                    |  |  |  |  |

Last day to submit forms to HCC is Wednesday, June 26, 2024.



## INT 100/200 Internship Course

#### STUDENT WAIVER OF LIABILITY AND ASSUMPTION OF RISK

(This is a release. Please read it carefully.)

STUDENTS MUST SUBMIT THIS COMPLETED FORM TO THE HAMEETMAN CAREER CENTER WITH STUDENT LEARNING AGREEMENT.

| I,<br>during: | <b>⊚</b> Fall | Spring        | Summer | , am a student at Occidental College and plan to undertake an internship 20semester, at the following location: |
|---------------|---------------|---------------|--------|---|
|               | (Inte         | ernship Site) |        | (City/State, please indicate if remote)   |

Occidental College does not control the way in which the internship work experience and the internship site are structured or operate. In granting credit for this internship the College affirms that, to the best of its judgment, the experience is an appropriate curricular or co-curricular option for students in a liberal arts program of study and worthy of Occidental College credit but makes no other assurances, expressed or implied, about any the internship experience, travel or living arrangements the students has made.

Occidental College does not knowingly approve internship opportunities that pose undue risks to their participants. However, any internship or travel carries 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 the expenses not covered by this insurance, and I recognize that Occidental College does not have an obligation to provide me with such insurance or to pay any expenses not covered by insurance.

I assume full responsibility for any physical or emotional problems that might impair my ability to complete the experience, and I release Occidental College from any liability for injury to myself or damage to or loss of my possessions.

I understand that if I use my personal vehicle for the benefit of the agency with whom I perform my internship; Occidental College has no liability for personal injury or property damage which may result from that use. I agree to rely solely on my personal vehicle insurance coverage and on any additional insurance coverage provided by my internship agency.

I understand that I will not be entitled to unemployment compensation benefits upon completion of my internship. Further, I understand that Occidental College assumes no liability for personal injury that I may suffer in the course of my internship, and I agree to be responsible for ascertaining whether my internship agency provides workers compensation coverage for me.

#### PERSONAL CONDUCT

I understand that the responsibilities and circumstances of an off-campus internship may require a standard of professional decorum. Therefore, I indicate my willingness to understand and conform to the professional standards of the internship site. I further understand that it is important to the success of the present internship and continuance of further internships that interns observe standards of conduct that would not compromise Occidental College in the eyes of individuals and organizations with which it has dealings, and I acknowledge the Hameetman Career Center Director's responsibility for setting rules and interpreting conduct for this purpose. I agree that should the internship agency or Hameetman Career Center Director decide that I must be terminated from my internship because of conduct that might bring the program into disrepute, or the internship into jeopardy, that decision will be final and may result in the loss of credit.

#### **GENERAL RELEASE**

I am aware of a number of potential risks inherent in my participation in this internship, all of which are beyond the control of Occidental College. I understand that these risks include, but are not limited to, risks arising from:

- Commuting to and from the placement site;
- Providing services to people who may become unpredictable, angry or violent;
- Exposure to communicable or infectious diseases, such as coronavirus disease (COVID-19), or toxic substances;
- Working in unfamiliar surroundings, neighborhoods or communities;
- Absence of means of communication in the community where I may travel
- Long distances that may separate me from emergency and law enforcement services

| Student Waiver Form – Page 2  | Student Name:                                 |   |
|---|---|---|
| I acknowledge that all risks cannot be prevented and some risk including death. I agree to assume those risks, whether forese expressly assume that the responsibility of educating myself to risks, both known and unknown.        | en or unforeseen, that are beyond the reas    | sonable control of Occidental College. I        |
| I, on behalf of my heirs, assigns, representatives, executors, officers, board members, employees, advisors, agents or representatives (including, but not limited to, death) that may result fit departure or following my return. | esentatives from any liability that may arise | e from any bodily or mental harm, injury, loss, |
| SCOPE OF RELEASE- I am signing this Liability Release, and  | d Claim Waiver with full knowledge of Califo  | ornia Civil Code Section 1542, which reads:     |
| "A general release does not extend to claims whi executing the release, which if known by him mu  I waive the provisions of this statute, and any similar provision   | st have materially affected his settleme      | nt with the debtor."                            |
| I have read the foregoing and sign this as an act of my own fre   | ee will, without coercion or duress.          |   |
| Signature   | Please Print                                  | Date  |
| Parent or Guardian (if participant is under age 18)   | Please Print                                  | Date  |

# LEARNING OBJECTIVES

#### **Learning Objective Description**

Learning Objectives help you focus on what you hope to learn from your experience before you start your internship. They can be directly or indirectly related to your course of study. Learning Objectives provide information to the Internship Supervisor to assure that you are acquiring knowledge and skills that you wish to learn (in addition to performing the tasks required of the internship). Describe, for example: what knowledge you wish to acquire; what intellectual or functional skills you hope to develop; what academic or practical issues you hope to master; what academic, career, or personal values do seek to explore. Tip: Confer with your Internship Supervisor that your learning objectives are manageable and that you will be able to successfully achieve them before the end of your internship assignment.

#### Writing a Learning Objective

Below are key areas to focus on when writing your Learning Objectives.

- A. Knowledge to be acquired:
  - 1. Regarding one's academic major (i.e., theories, practices)
  - 2. Related to a particular business, industry, or operational function
  - 3. Relevant to career development
- B. Skills to be developed (both intellectual and functional):
  - 1. Analytical skills for one's academic major
  - 2. Operational skills to perform functions required in the internship assignment
  - 3. Interpersonal skills to interact successfully on-the-job
- C. Problems to be solved:
  - 1. Application of one's academic major
  - 2. Details to understand about one's work assignment
  - 3. Questions to resolve about one's personal interests
- D. Values to be clarified:
  - 1. Interest in the nonprofit, private, government, or non-governmental organization (NGO) sectors
  - 2. Team or individual, business professional, business casual or casual work environments
  - 3. Mission or results-driven work
  - 4. Passion for small, mid-sized or large firms

EXAMPLE: Here are some sample Learning Objectives (LO) and Strategies for Completion of Objectives (SCO) for someone whose goal is to be competitive to work in the Public Relations departments of Warner Brothers.

LO1: To learn how to write marketing material

LO2: Gain exposure to the steps to planning a large-scale event

LO3: Learn how to promote Warner Brothers events to invitees

SCO1: I plan to craft promotional literature SCO2: I will ask to work on an event SCO3: Attend P.R. team meetings

# SUMMER REGISTRATION FORM

# Office of the Registrar

# **Submission deadline posted online**

| Last                | First                     | N                    | Middle      |          | ID Number              |
|---------------------|---------------------------|----------------------|-------------|----------|------------------------|
| Street Address      |                           | City                 | State       | Zip      | Email                  |
| Street Address      |                           | City                 | State       | Zīp      | Eman                   |
| Phone No.           | Birth date                |                      |             |          |                        |
| Course(s) in which  | h you wish to enroll:     |                      |             |          |                        |
| 1. Dept/No.         | Title                     |                      | Units       | ]        | Instructor Signature   |
| 2.                  |                           |                      |             |          |                        |
| Dept/No.            | Title                     |                      | Units       | ]        | Instructor Signature   |
| 3. Dept/No.         | Title                     |                      | Units       | ]        | Instructor Signature   |
| To enroll in a sumr | ner independent study thi | is form must be acco | ompanied by | an Indep | endent Study Contract. |
|                     | mer internship, please go |                      |             |          |                        |
| Student Signature   |                           |                      |             | Date     |                        |
| Student Accounts (  | Office Signature          |                      |             | Date     |                        |
| Registrar Signature | 2                         |                      |             | Date     |                        |