

BSCI 40192 Internship in Biological Sciences (3-12 hours)

_____ Make sure that you meet the prerequisites: *18 hours of completed BSCI coursework; 2.75 minimum major GPA; faculty advisor approval will be indicated by signature on internship application.*

_____ **Meet with the Department of Biological Sciences Undergraduate Coordinator to discuss the internship and to receive preliminary approval.**

_____ Meet with the internship supervisor and discuss the expectations, requirements, and procedures for the internship. Approval will be indicated by the signature of supervisor on the internship application.

_____ Write an Internship proposal (minimum 2 pages) describing what you will do and learn, and how the job contributes to the organization, or business. Discuss how the internship experience relates to your academic courses and career goals, and indicate how many hours you expect to work per week. Submit to Undergraduate Coordinator. Electronic copies are preferred.

_____ Complete the Internship Application and “Hold Harmless” Agreement of Responsibility (including all required signatures). Submit documents to Undergraduate Coordinator.

_____ The Undergraduate Coordinator will evaluate the internship application and proposal for final approval. If granted, BSCI administrative personnel will register the student for the course.

_____ *If necessary, inform the Undergraduate Coordinator if there are any changes in the nature of the work experience, including changes in the type of work or in the number of hours to be worked.*

_____ Keep a daily journal briefly describing experiences. The journal entries shall include date and time of each work session, and briefly describe work done (e.g. tasks performed, techniques learned, interesting experiences, general observations, experimental results, etc.).

_____ At midterm, submit a brief written summary of experiences (***minimum of 1-2 pages for every credit hour for which you have enrolled***) and a copy of the journal to the Undergraduate Coordinator. The summary should outline training to that point and may include responses to topic suggestions (sent by Undergraduate coordinator).

_____ The Department will send a midterm evaluation form to be completed by the supervisor.

_____ At the conclusion of the internship, submit a written summary of the experiences (***minimum of 2-3 pages for every credit hour for which you have enrolled***) and a copy of your daily journal to the Undergraduate Coordinator.

The final report should:

- Summarize the entire process from learning about the internship to the student’s final contribution to the employer.
- Include a discussion of the organization’s structure and mission.
- Discuss the internship experience and relate it to your academic courses and career goals.
- Include responses to additional topic suggestions (sent by Undergraduate coordinator).

_____ The Department will send a final evaluation form to be completed by the supervisor.

_____ Grading by the Undergraduate coordinator will be based on evaluations and quality of reports. Relative emphasis in grading will be: proposal (10% of total grade), Midterm summary and Journal (25%), Final report and Journal (25%), Evaluation by Supervisor (40%).

BSCI 40192 Internship in Biological Sciences (3-12 hours)

Work experience and training in the biological sciences under the supervision of appropriate personnel in a governmental agency, nonprofit organization, or business.

Prerequisites:

- 18 hours of biology courses completed
 - 2.75 minimum GPA in biology courses
 - **Faculty Advisor acknowledgment and Departmental approval from the Undergraduate Coordinator**
- Credit Hours in Major: _____
Average GPA: _____ Major GPA: _____

Internship Application and Agreement of Responsibility

Year: _____ Major: _____
Semester (check one): Fall ____ Spring ____ Summer I ____ Summer II ____ Summer III ____
Name: _____ Banner Number: _____
Email Address: _____ Phone Number: _____
Credit Hours Requested: _____ Biology CrHr*: _____ (Max 4 per summer term) KSU CrHr: _____ (Max 12)

Conversion of work hours to credit hours:

45 hours of work is required for every one semester hour of academic credit. For example: 3 hours of credit is equivalent to 135 hours; in a 15-week semester, a student must work an average of at least 9 hours per week. For three credit hours in a five-week summer session, a student must work at least 27 hours per week.

- * Students may only select a maximum of 6 credit hours of any combination of these courses (BSCI 30105, BSCI 40191, BSCI 40192, BSCI 40196, BSCI 40199) to apply toward BSCI upper-division elective hours.

To the Supervisor: The internship should involve work experience or professional training in the biological sciences. The internship should provide an opportunity for the student to make a meaningful link between academic course work and the work or field environment. The work should involve activities that include data collection, data analysis or the application of knowledge.

Internship Supervisor's Name (please print): _____

Internship location, including complete address and phone number, with a **legible** email address for your supervisor:

Place of Internship: _____ Supervisor's Email address: _____
Address of Internship: _____ Supervisor Phone No.: _____

Internship plans: Attach a 2-3 page proposal indicating what you expect to gain from the internship. Discuss what you will learn and do, and how the job contributes to the organization, or business. Discuss how the internship experience relates to your academic courses and career goals, and indicate how many hours you expect to work per week.

Signatures:

Student	Date: _____
Internship Supervisor	Date: _____
Faculty Advisor	Date: _____
Undergraduate Coordinator	Date: _____

HOLD HARMLESS AGREEMENT

Department of Biological Sciences

BSCI 40192 Internship in Biological Sciences

The internship course helps students obtain work experience and training in the biological sciences under the supervision of appropriate personnel in a governmental agency, nonprofit organization, or business. Because we cannot assume responsibility for the various persons and agencies which may provide internships, we ask that you adhere to the following terms and conditions of participation in the internship course. Your dated and witnessed signature indicates that you understand and agree to these terms and conditions. July 27, 2004.

Agreement/Release

WHEREAS, I, _____ **am**
a student registered for and desire to participate in a Kent State University Department of Biological Sciences Internship in Biology to be conducted at herein after referred to as "Internship" and

WHEREAS, this Internship has been organized by the Department of Biological Sciences, Kent State University, Kent OH 44242-0001 and is coordinated by Professor _____, a member of the faculty of the Department of Biological Sciences; and

WHEREAS, I understand and agree that there are risks to my person and property and to the person and property of other associated with my participation in this Internship; and

WHEREAS, I understand and agree that my participation in this Internship is completely voluntary; and

WHEREAS, I understand and agree that Kent State University does not provide any insurance coverage for any injury or damage to my person and property nor for injury or damages to the person and property of others while participating in this Internship; and

WHEREAS, I understand and agree that any arrangement for remuneration or insurance coverage is strictly between myself and the organization providing this Internship.

NOW, THEREFORE, I, _____ the undersigned, being 18 years of age or older and therefore an adult according to the laws of the State of Ohio, in consideration of the educational advantages and opportunities afforded me by my participation in this Internship, agree to hold Professor _____, a member of the faculty of the Department of Biological Sciences and coordinator of this Internship; Kent State University; its Board of Trustees; officers and employees harmless for any direct, indirect, special, or consequential damages which I may incur or be held liable for as a result of the negligence of one of these persons or agencies. This agreement shall be binding on my heirs, guardians, beneficiaries, and assigns.

Your Name Printed

Place of Internship

Semester Enrolled

Year

FURTHERMORE, I agree to accept full and total responsibility for my actions at all times while a participant in the above described Internship.

I have read the above terms and conditions of this Hold Harmless Agreement and I understand and agree to the terms and conditions of this agreement.

Your Signature

Your Name Printed

Your Address

City

State

Zip

Telephone

Email

Witness by (Signature) This cannot be the Internship Coordinator.

Witness Name Printed

Witness Address

City

State

Zip

Date