***Troy Internship Coordinator:***
Dr. Robert Mathner, Professor
Phone: (334)-670-3811
rmathner@troy.edu

http://troy.edu/hstm

Dr. Christina Martin, Director
327 John Robert Lewis Hall,
Troy University
Troy, Alabama 36082
Phone: (334) 808-6400
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Email: cllmartin@troy.edu

The HSTM internship program offers

5. Inform the student of all regulations and practices, which must be observed by the student.

6. Evaluate the work of the student:
    a. Discuss with the student specific indications of progress, strengths, and weaknesses;
    b. Set an example by presenting criticism in a constructive, objective, and tactful manner; and
    c. Complete the written evaluation forms (A-3, A-8, A-9, A-10) provided by the Internship Program Coordinator and after discussing your comments with the intern send the form to the university supervisor.

C. Final Review of Internship by University Supervisor: 10%

- Grade from final notebook evaluation

Percentage from criteria equal 100%

All reports and assignments are evaluated on the following criteria:

1. Completeness
2. Promptness
3. Readability

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The valuation of the students' performance is a collaborative effort between supervisory individuals with the internship agency supervisor providing 60% of grade and the Internship Program Coordinator responsible for issuing 40% of final grade.

Student evaluations should reflect the following rating scale:

Students in consistently exceptional in fulfilling responsibilities

Student constantly fulfills responsibilities above minimum performance standards

Student meets minimal performance standards

Student usually meets minimum performance standards, however needs to improve in a number of areas of responsibility. (Student must retake course)

Performance is inadequate and unacceptable. (Student must retake course)

All assignments must be typed using Times New Roman 12 point font

1) Initial Report and Agency Orientation Checklist (A-3):
   a) Cite weekly schedule and responsibilities
   b) List ten (10) measurable objectives outlining expected learning experiences
   c) Discuss personal and agency expectations

   Due: This assignment must be typed and submitted at the end of the first week of internship. The assignment should be submitted to the Internship Program Coordinator via email, fax or hard copy no later than the following Friday by 4:00 p.m.

Must be submitted before pre-registration of internship.

Student's name: _____

Address: _____

Phone: I.D. Number:

University E-mail: Semester:

Year: Course: HSTM 4490

Agency's Name: _____

Agency's Address:

Instructions: This report must be completed at the end of each three-week period by the student, reviewed by the assigned Agency Supervisor, and mailed, faxed, or emailed to the Internship Program Coordinator by the following Friday. If needed, written concerns will be provided to the student from the Internship Program Coordinator.

Student: _____

Semester: _____ Report Number: _____

Weeks of the Report (dates): _____ to _____

Total Hours for this Period: _____ Total Hours to Date: _____

1. Describe the evaluation period's experiences (include learned skills, knowledge, and abilities).
2. Identify attended meetings and conferences (include formal and informal meetings with your agency supervisor and topics discussed.)
3. Cite any areas of special concern at this time (include any issues related to the internship experience).
4. Proposed agenda for next three weeks (include agency assignments, short and long term projects, accomplishment of internship goals).
5. This assignment must be typed on a separate sheet of paper to address these previous points and attached to this form.

_____ _____

Student's Signature Date

_____ _____

Agency Supervisor's Signature Date

(To be submitted to Internship Program Coordinator by the end of the third week of the internship) Please type responses on a separate sheet of paper.

Student's Name:

Agency:

Title of Project:

1. Brief Description of Project Plans:

2. Rationale for Project Selection (need/purpose):

3. Project Costs and Potential Sources of Funding:

4. Expected Outcome(s):

_____ _____

Agency Supervisor's Signature Date

(To be submitted to Internship Program Coordinator by the end of the third week of the internship) Please type or use

p 0 Tw 2.16 Tc 0.01 Tw 2.79 0(p 0 6 0 Td( )Tj0.001 Tc 0.01 Tw .014j-0.004

The student intern should be provided immediate feedback from a stee-(i)-5 (n)-13 (t)-15 (e)-932.87 0 T 0 Td( )T

Date: _____

Student Name: _____

Supervisor:_____ Title:_____

Agency: _____

Carefully complete the mid-point evaluation after considering the student's work on the short term project as well as all work completed through mid-point of internship. Be as accurate and objective as possible. The appraisal is to be reviewed with the student during the midterm evaluation conference.

Using the scale below, rate the student on each of the listed items as they are applicable to your situation and professional expectations. Comments and suggestions are welcome and can be added at the end of the form.

5 = Outstanding 4 = Good 3 = Average 2 = Below Average
1 = Unsatisfactory 0 = No Observation

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| | |
|---|---|
| Willing and prompt to perform assigned duties | 5 4 3 2 1 0 |
| Willing to accept additional responsibilities | 5 4 3 2 1 0 |
| Shows enthusiasm for work | 5 4 3 2 1 0 |
| Cooperative with staff | 5 4 3 2 1 0 |

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| | |
|---|---|
| Plans and organizes work in orderly manner | 5 4 3 2 1 0 |
| Produces quality work | 5 4 3 2 1 0 |
| Has necessary background of knowledge in field | 5 4 3 2 1 0 |
| Has sufficient professional skills | 5 4 3 2 1 0 |
| Functions on own initiative when necessary | 5 4 3 2 1 0 |

Demonstrates effective

2. In

Student Name:_____ Date: _____

Supervisor:_____ Title: _____

Agency: _____

| | |
|---|---|
| Can express him/herself in writing | 5 4 3 2 1 0 |
| Can express him/herself verbally | 5 4 3 2 1 0 |
| Communicates well with supervisor | 5 4 3 2 1 0 |
| Communicated well with public/clients | 5 4 3 2 1 0 |
| Makes use of available media in promoting programs | 5 4 3 2 1 0 |
| Demonstrates ability to accept ideas, methods, or plans from other staff members | 5 4 3 2 1 0 |
| Exhibits self-discipline | 5 4 3 2 1 0 |
| Demonstrates creativity | 5 4 3 2 1 0 |
| Shows adaptability | 5 4 3 2 1 0 |
| Has curiosity and desire to learn | 5 4 3 2 1 0 |
| Shows courtesy towards others | 5 4 3 2 1 0 |
| Accepts direction and criticism | 5 4 3 2 1 0 |

Please identify the student's primary strengths and weaknesses at the completion of the internship.

Other Comments:

Assign a score based on your evaluation of the student's performance

35 34 33 32 31 30 29 28 27 26 25 24 23 22 21 20 19 18 17 16 15 14 13 12 11 10 9 8 7 6 5 4 3 2 1 0

_____ _____

Signature of Agency Supervisor Date

_____ _____

Signature of Student Date

School of Hospitality, Sport & Tourism Management 323
John Robert Lewis Hall, Troy University
Troy, Alabama 36082

Upon completion of the internship experience, each student is responsible for submitting both a final report and an internship notebook to the Internship Program Coordinator. An outline is provided below to assist the student in organizing the assignment.

*Title Page*

- Name of student, area of specialization, name of agency and agency supervisor, dates of internship, semester and year of registration.

*Evaluation of Student's Goals and Objectives*

- Identify the 10 objectives listed in your initial report.
- Rate each objective as met, partially met, or not met.
- each response regarding your accomplishments or lack thereof for each objective. Include a copy of your initial report with this document.

*The Internship Experience*

- Description of internship focusing on your evaluation of what you learned and how it has assisted you with your professional development. Point out highlights and disappointments of the experience.

*Career Preparation*

- Thoroughly analyze the experience reflecting on your future in the workplace. Describe your strengths, interests, performance, problems, needs, and concerns after reflecting on your internship experience.

*Recommendations*