Master of Education in Curriculum and Instruction
(MED)

EDUC 591

Graduate Internship Packet

This packet contains the forms you will need for your internship:

1. Graduate Internship Information Sheet
2. Graduate Internship Application
3. Employer/Intern Agreement
4. Sample Work Log
5. Internship Evaluation
EDUC/ECTE 591 is a supervised work internship in an appropriate setting. The intern will be required to create a portfolio. One credit of EDUC/ECTE 591 equals 66 clock hours. During the semester that you are enrolled for EDUC/ECTE 591, a FSU internship supervisor will be assigned to visit your internship site and discuss your progress. (Variable credit, 1-3 semester hours)

**Internship Guidelines:**
The internship should allow the student to:

1. Acquire and/or update skills/competencies,
2. Apply and critique (analyze) theoretical concepts/ideas.

Generally, Internships may NOT include:

1. Hours worked prior to registering for EDUC/ECTE 591,
2. Experiences that are part of consulting work,
3. Experiences that are part of your regular job description,
4. Experiences that are carried out during your regular work hours,
5. Experiences that occur at your regular worksite.

**Internship Approval Process:**
1. Complete the Graduate Internship Application. Meet with the Graduate Internship Coordinator to turn in application and discuss proposed internship site and appropriate learning objectives.
2. Return completed and signed Employer/Intern Agreement to the Graduate Internship Coordinator for approval.
3. Upon approval of the Employer/Intern Agreement by the Graduate Internship Coordinator, the student may register for EDUC/ECTE 591.

**Internship Evaluation:**
A final grade for EDUC/ECTE 591 will be based on the following:

a. achievement of learning objectives
b. quality of work logs and journal
c. preliminary and/or final evaluations by on-site supervisor
d. evaluation by FSU internship supervisor
e. over-all quality of portfolio materials.
Ferris State University
College of Education & Human Services
School of Education

Master of Education in Curriculum and Instruction (MED)
EDUC/ECTE 591
Graduate Internship Application

Date: ____________________

Name: ________________________________ SID #: ____________________________

Address: ________________________________________________________________ (Street City State Zip)

Phone Number: (______)____________________ E-Mail Address: _______________________

Major: ________________________________ Minor: ________________________________

Semester Requesting internship: Fall ________ Spring ________ Summer ________

Number Credits Seeking: ___________ I wish to register for ___ EDUC 591 ___ ECTE 591

Present Employer: ______________________________ Supervisor’s Name ______________________

Company/Agency Name

Employer Address: ________________________________________________________________

Street City State Zip

Phone Number: (______)____________________ E-Mail Address: _______________________

List potential internship site(s), including business addresses, phone numbers and e-mail:

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Describe the goals and learning objectives that you expect to complete during your internship: (attach a job description if available)

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
I, _________________________, agree to work with ________________________________
Intern company/agency
In the position of _______________________________ beginning on ___________ and ending on
date date

The employer/on-site supervisor agrees to:
1. Submit evaluation(s) of the intern’s performance.
2. Notify the intern’s FSU internship supervisor of any conflicts or conditions which could result in
   early termination of the internship experience, and agrees to discuss reasons for the termination
   with the intern’s FSU internship supervisor. The employer reserves the right to terminate the
   internship at any time the intern violates the terms and conditions of this agreement, and the
   intern and the University reserve the right to terminate the internship at any time the employer
   may violate the terms of this agreement.
3. Provide a work setting and location in which the intern may achieve the following learning
   objectives: (to be completed by the intern)
The intern agrees to:
1. Work toward achievement of agreed upon learning objectives.
2. Provide FSU internship supervisor with a work schedule of internship hours.
3. Periodically, as determined by the FSU internship supervisor, submit work logs that describe learning objectives/activities and document work hours.
4. Provide the internship on-site supervisor with Internship Evaluation form(s), as determined by the FSU internship supervisor, and return completed evaluation(s) to the FSU internship supervisor.
5. Create and maintain a portfolio throughout the internship experience. The portfolio should include:
   a. A daily/weekly journal of observations and reflections about your experience.
   b. Work logs.
   c. Internship evaluations.
   d. Documents, manuals, papers, projects, etc., when appropriate, that reflect achievement of learning objectives.
   e. A final paper summarizing your observations, reflections, and achievements during your internship experience.

Please provide the following information regarding the internship site:

Employer: ________________________________ On-Site Supervisor _______________________
Agency/Company Name

Employer Address: ______________________________________________________________
Street City State Zip

Phone Number: (______)____________________ E-Mail Address: _________________________

WE THE UNDERSIGNED hereby agree to the terms and conditions of this agreement:

Intern: __________________________________________ Date: __________________________

Employer/Agency Representative: __________________________ Date: __________________

Internship On-site Supervisor: ____________________________ Date: __________________

Graduate Internship Coordinator: __________________________ Date: __________________

Approved for ___ (#) credits for ____________ for ___ EDUC 591 ___ ECTE 591
Semester / Year

Return this form to:
Graduate Internship Coordinator
Ferris State University
School of Education – Bishop 421
1349 Cramer Circle
Big Rapids, MI 49307
Phone: 231/ 591-3511
Fax: 231/ 591-2043

5/2010
Master of Science in Career and Technical Education (MSCTE)

ECTE 591
WORK LOG

Intern Name__________________________ Employer/Agency:________________________

Monday

__________________________________________________________

Tuesday

__________________________________________________________

Wednesday

__________________________________________________________

Thursday

__________________________________________________________

Friday

__________________________________________________________

Saturday

__________________________________________________________

Other comments:

Week of:__________________________ Total Hours:________________________
Cumulative Hours:________________________
Ferris State University
Master of Science in Career and Technical Education
ECTE 591
MSCTE Internship Evaluation

INTERN NAME___________________________________________

Please give your opinion about the progress and achievement of the intern.
Directions: Place an "X" in the box which best describes the intern.

**Part I - Rating**

1. **Communication Skills:**

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<th>Not observed</th>
<th>Unacceptable</th>
<th>Needs Improvement</th>
<th>Average</th>
<th>Good</th>
<th>Excellent</th>
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</thead>
<tbody>
<tr>
<td>a. Effective verbal communication</td>
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<td>b. Effective written communication</td>
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Comments:

2. **Occupational Knowledge, Skills and Ability:**

Progress on or achievement of learning objectives/assigned tasks.
( Objectives to be listed by intern: Use key words to identify. List complete objectives on back.)

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<th>Unacceptable</th>
<th>Needs Improvement</th>
<th>Average</th>
<th>Good</th>
<th>Excellent</th>
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<td>b.</td>
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<td>c.</td>
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Comments:

3. **Personal/Professional Characteristics:**

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</thead>
<tbody>
<tr>
<td>a. Initiative</td>
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<td>b. Dependability</td>
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<td>c. Professional Dedication</td>
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<td>d. Response to Constructive Criticism</td>
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<td>e. Enthusiasm</td>
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Comments:

(over)
Part II - Additional Remarks/Comments

Employer/Evaluator Signature__________________________________________________ Date_________________

Return evaluation form to:

Ferris State University
School of Education
Bishop 421
1349 Cramer Circle
Big Rapids, MI 49307

INTERN: List complete learning objectives from Employer/Intern Agreement.

a. 

b. 

c. 

d. 

e. 

16-Oct-02