

The Cascade Academy Foundation

Student Internship Guidelines

Name: _____



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INTERNSHIP RESPONSIBILITIES

DATE: Summer 2011
TO: Interns
FROM: Tracey Williams, Career & Guidance Coordinator
RE: Internship Responsibilities

Enclosed you will find “**Directions for Completing a Successful Internship**” that will guide you through a positive summer internship. Please read and review the material and plan to utilize as many of the suggestions as appropriate. Also, you will complete the **Cascade Academy Foundation Internship Agreement** and return it to Mrs. Williams within one week.

We hope that you use your internship as an opportunity to demonstrate your competence and initiative to all those with whom you become acquainted. The positive impression you make will be helpful to you in the future when you are seeking a reference or a permanent position. Recognize that you are also creating an impression for Reynolds High School.

Be reminded that the required internship reflection must be submitted within one week of completing your internship. Guidelines for this reflection are included in your packet. Make three copies as you will be required to turn in a copy to your employer and you will want to include one in your senior portfolio.

You are expected to communicate with your RHS supervisor after you start your internship and upon completion of your internship. If you have any questions, problems or concerns, please call Mrs. Williams at the cell number below.

Contact Information

Tracey Williams
Career Guidance Coordinator
CAF Board Secretary
Reynolds High School
1698 SW Cherry Pk. Rd.
Troutdale, OR 97060
School: 503-667-3186 Ext. 1075 (school year only)
Cell: 503-502-0483 (use during summer)
Tracey_Williams@reynolds.k12.or.us

DIRECTIONS TO COMPLETE A SUCCESSFUL INTERNSHIP

Directions: Please follow the detailed directions below to complete an internship successfully and earn credit at RHS.

1. Read all internship information provided to you in this packet so that you will be able to complete all the tasks required in this internship successfully. **Return RHS Agreement & Permission form to Mrs. Williams within 1 week.** You will be able to obtain all signatures except your employers.
2. Purchase a folder and organize it to keep all your internship documents in.
3. Record your responsibilities and activities in the **daily journal** that is provided to you in this packet, as it will help you in completing your internship report.
4. Use the **“Time Report”** provided to keep track of your hours. Be sure that both you and your supervisor sign your time report upon completion. **Remember, you need 80 hours to receive .5 elective credit at RHS. You will receive a “Pass/No Pass” grade.**
5. Please note that it will be your responsibility to **contact me (e-mail)/your RHS supervisor at least 3 times throughout this experience:**
 - a. **During the first week of your internship** (check in by e-mail regarding progress of internship) .
 - b. **Upon completion of the internship.** Please call/e-mail me/your supervisor the last day (if not before) of your internship. We will be anxious to hear about your experience.
 - c. **Upon completion of your reflection and final paperwork from your internship packet.**
6. During or immediately following your internship, type your reflection by following the instructions included in this packet. Make arrangements to get your reflection e-mailed to me /your supervisor **within 2 wks. of completing the internship.**
7. Complete all paperwork inside this packet, **including all items** listed on your **“End of Internship Checklist”**. Make arrangements to get your final paperwork from the internship turned in to me/your supervisor **within 2 wks. of completing the internship.**
8. When all documents have been completed and turned in to your supervisor, arrangements will be made to get your stipend mailed to you. Stipend checks will be generated no more than once a month in July and August.
9. When we return in the fall, I will take care of adding .5 credits onto your transcript.

Remember, communicate, communicate, communicate! Your supervisor should not be tracking you down!

Employment Foundation Goals

By the end of your CAF internship you will be able to identify the following career related learning skills and employment foundations relating to your internship workplace. These will help you to write your end of internship reflection paper.

- What were your responsibilities?
- How responsive and helpful were your supervisors?
- Did you find your co-workers accepting and cooperative?
- What did you learn on the job?
- Describe how you demonstrated responsibility and self-management in your internship.
- Describe how teamwork is evident at the job site.
- Describe the importance of working with people from diverse backgrounds.
- Describe the importance of communicating clearly and accurately in the workplace.
- Describe the importance of identifying and solving a problem in the workplace.
- Were you able to apply skills and knowledge learned in Academy courses in school to your internship experience?
- To what extent did your internship affect your plans for a career in the finance industry?
- How would you rate your overall internship experience? Please explain.
- What problems, if any, did you encounter? How did you handle these problems?

Cascade Academy Foundation Internship Agreement & Permission Form

Student Name: _____ (Please Print) Grade: _____

The STUDENT agrees to:

1. Keep regular attendance, both in school and on the job, notify the school and supervisor if unable to report to work. Student cannot work on any school day that he/she fails to attend school without the signed consent of school representative. Participating students who fail to regularly attend and make satisfactory progress in school courses and required related training may be removed from the internship program.
2. Demonstrate honesty, punctuality, courtesy, a cooperative attitude, proper health and grooming habits, appropriate dress and willingness to learn.
3. Inform the Supervisor and School Representative about any difficulties arising at the training site.
4. Conform to the rules and regulations of the Supervisor and participating business or school.
5. Furnish the School Representative with all necessary information, complete all necessary reports.
6. Comply with school policies.
7. RHS Internships are provided to students who **maintain minimum academic standards, including attendance at school** and STW activities.

I realize that failure to comply with all rules and regulations associated with the CAF Internship Program may result in my removal from the program.

Student's Signature: _____ Date: _____

The PARENT agrees to:

1. Give my consent for _____ to participate in the CAF Internship program, understanding that the student will maintain a C or better status in all classes as well as consistent attendance.
2. Encourage the student to effectively carry out duties and responsibilities.
3. Guarantee that the student is covered by adequate insurance related to travel to and from the school site.
4. (Print Name) _____ hereby agree to release, hold harmless, indemnify and defend Reynolds School District and its employees, officers, board of directors, agents and assigns (hereinafter RDS) from any and all liability for personal injury, death, property damage and loss of use of property including, but not limited to claims that may occur before, during or after the attendance of my child or ward at Internship activities, whether due, in whole or in part, to the negligence of Internship program or any other theory of liability against it, or any other cause. I understand that there are inherent and other risks involved in travel to and from and attendance in Internship activities. I freely and voluntarily accept these risks for my child or ward and all other risks associated with travel to, and attendance at, Internship activities. I also understand and agree that RSD is not responsible for the time or manner which my child or ward may arrive or leave Internship activities.

I have read and understand this general consent release and indemnity agreement and accept its terms and conditions.

Parents of Student Signature: _____ Date: _____

Reynolds High School Internship Agreement & Permission Form (Page 2)

The EMPLOYER agrees to:

1. Adhere to all federal and state regulations regarding employment, internships, insurance, safety, follow child labor laws, minimum wages, discrimination and other applicable regulations.
2. If student is hired by the employer, workman's compensation insurance will be provided by said employer.
3. Agrees to provide the student with competent supervision at all times, and assist the student in achieving necessary skills and knowledge.
4. Promptly notify the School Representative about students having any difficulties arising at the worksite or absenteeism.
5. Provide continuing and final evaluations for the teacher intern and allow reasonable time for consultation with the school representative.
6. Certifies that an adult employee is not being displaced by hiring a student in a work-based learning program.
7. Agrees to complete student evaluations (attached).
8. Allow on-site monitoring of student by school staff.

Supervisor (or Employer) Signature: _____ Date: _____

The SCHOOL DISTRICT agrees to:

1. Provide a School Representative to work with the student to facilitate the student's successful completion of the program and to ensure close coordination between academic instruction, work-based learning, and related training.
2. Will provide supportive curriculum or assist in fulfilling related training.
3. Assist employer in resolving any problems relating to the Internship.
4. Grant academic credit toward a high school diploma upon satisfactory performance in CAF Internship program.
5. If appropriate, monitor and record student's progress.
6. Provide workman's compensation insurance for all students participating in RHS CAF internship activities.

RHS Representative's Signature: _____ Date: _____

STUDENT PHOTO/VIDEO RELEASE FORM

In connection with the Internship Experience at RHS, this program may take photographs, for use in publications, videotapes, and other materials to promote the school-to-work program, and to inform interested parties about such activities.

Parent (or legal guardian) of the below-named student consents to the use of the student's likeness and/or voice in such publications, videotapes, and other materials and releases and discharges Reynolds High School, its agents and consultants, directors, employees, and officers from all claims for loss, damage, injury, or expense arising from such use.

Student Name: _____

School: _____

Signature of Parent or Guardian: _____

Reynolds High School Career Center
Tracey Williams, Career Guidance Coordinator
CAF Board Secretary
1698 SW Cherry Park Rd.
Troutdale, OR 97060
(503) 667-3186, ext. 1075

Tracey_williams@reynolds.k12.or.us

Reynolds High School Transportation and Release Form

Name of Student: _____

Age: _____ Phone: _____

Address: _____

City, State, Zip: _____

School Activity or Athletic Event: _____

During the course of the school year, your child may be involved in various school-related activities and athletic events sponsored by Reynolds High School. The District has elected to establish guidelines relating to transportation of students for these events. There will be some activities that the District will not be providing transportation to and from the event or activity. For those events/activities, your child will be responsible for their own transportation. This form is intended to advise parents and guardians of legal rights and duties and to release the District from all liabilities arising out of students transporting themselves in privately owned vehicles.

I acknowledge that I have reviewed the following procedures:

- a) There may be times/occurrences in which my child will be transported in a privately owned vehicle.
- b) There may be times/occurrences in which my child will be transported in a vehicle driven by another adult or student
- c) I further agree to release and to indemnify and hold-harmless the School District, employees, school board members, volunteers, from any claims and liabilities (including costs and attorney fees) arising out of or in any way connected to the transportation of my child/guardian in personally owned vehicles either owned by me or any other party. This release and Indemnity agreement does not apply to gross negligence on the part of the District or its employees.
- d) I understand that I am responsible for damage to my own automobile.

Signature of Parent or Guardian: _____

Today's Date: _____

Daily Journal

Monday

Date: _____

Tuesday

Date: _____

Wednesday

Date: _____

Thursday

Date: _____

Friday

Date: _____

Daily Journal

Monday

Date: _____

Tuesday

Date: _____

Wednesday

Date: _____

Thursday

Date: _____

Friday

Date: _____

Time Report

Reynolds High School Academy of Finance Time Report

Student Name: _____

Worksite: _____

Date	Hours Worked	Supervisor

Date	Hours Worked	Supervisor

Total Hours Worked	
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The undersigned certify that this time report is correct and the hours were actually spent at the worksite indicated.

Student Signature

Date

Worksite Supervisor Signature

Date

Reynolds High School

Work-Based Experience
Career-Related Learning Plan Evaluation

Student Name _____ Supervisor _____
 Student Phone # _____ Employer/Company _____
 Instructor _____ Start Date _____

Evaluation: Ratings are assigned and jointly reviewed by the student and the supervisor of the experience. Evaluations are also reviewed with the instructor and may be shared with the student's parents or guardians.
 4= Exceeds expectations in performing this task/skill.
 3= Can perform this task/skill satisfactorily without supervision.
 2= Can perform this task/skill satisfactorily with supervision; needs additional work.
 1= Cannot perform this task/skill satisfactorily.
 NA= Not observed or not applicable at this time.

Tasks/Skills	Evaluation	
	Student	Advisor
CAREER RELATED LEARNING STANDARDS		
Personal Management: Exhibit appropriate work ethic and behaviors in school, community, and/or workplace.		
1. Complete tasks on time and meet established standards of quality.		
2. Maintain regular, on-time attendance.		
3. Interact appropriately with others.		
Problem Solving: Apply decision-making and problem-solving techniques in school, community, and/or workplace.		
1. Accurately identify a problem.		
2. Locate information that leads to a solution to the problem.		
3. Develop and carry out a plan to solve the problem.		
Communication: Demonstrate effective communications skills to give and receive information in school, community, and/or workplace.		
1. Communicate clearly, accurately, and appropriately to other students and adults.		
2. Read and used technical and instructional materials for information and to carry out a task.		
3. Listen carefully and summarize key ideas.		
4. Give and receive feedback in a positive manner.		
Teamwork: Demonstrate effective teamwork in school, community, and/or workplace.		

Tasks/Skills	Evaluation	
	Student	Advisor
1. Identify and assume roles within a team.		
2. Work productively with others (e.g., negotiate, compromise, build consensus, share decision making, set goals, manage conflict).		
Employment Foundations: Demonstrate academic, technical, and organizational knowledge and skills required for successful employment.		
1. Use and maintain appropriate tools and technologies for a task.		
2. Follow safety, regulatory, and/or ethical practices in a work environment.		
3. Demonstrate appearance and hygiene appropriate to a workplace.		
Career Development: Demonstrate career development skills in planning for post-high school experiences.		
1. Assess your personal knowledge and skills related to your education and career goals.		
2. Plan for life after high school (e.g., research career and educational options, develop a plan to achieve goals).		
3. Review your education and career goals to determine if they should change.		
4. Use job-seeking skills (e.g., write resumes, complete applications, participate in interviews).		

Supervisor Comments:

Student Comments:

Supervisor signature: _____

Student signature: _____

Guidelines for Internship Reflection

Every RHS intern must submit a written reflection on his/her internship experience. Three copies of the reflection are needed. This internship reflection is an important program requirement and should be of the quality in which you expect to receive a grade for. The quality of the essay will also be valuable in assisting students in qualifying for honors, awards, and scholarships grants at graduation.

Due Date: Submit one copy of the reflection to me within two weeks of the end of your 2-week internship. One copy of the reflection will also be submitted to your employer prior to leaving the internship and you will keep a copy for yourself to satisfy career related learning standards for graduation.

Format: 1 page, typed, 8 ½ x 11 good quality paper, double-spaced, adequate margins, MLA format. Must include your name, school, date of report, and name of internship company.

Content:

1. **Description:** Name of CEO, brief history of firm, nature of business
2. **Basic Internship Date:** Employment dates, name address, and telephone number of supervisor(s), your pay during the summer (if applicable).
3. **Description and Evaluation of Internship:** Cite specific examples in answering these questions (in any order you deem appropriate).
 - What were your responsibilities?
 - How responsive and helpful were your supervisors?
 - Did you find your co-workers accepting and cooperative?
 - What did you learn on the job?
 - Describe how you demonstrated responsibility and self-management in your internship.
 - Describe how teamwork is evident at the job site.
 - Describe the importance of working with people from diverse backgrounds.
 - Were you able to apply skills and knowledge learned in Academy courses in school to your internship experience?
 - To what extent did your internship affect your plans for a career in this industry or otherwise?
 - How would you rate the overall experience?
 - What problems, if any, did you encounter? How did you handle these problems?

Proofreading: Be sure to proofread your reflection for spelling, grammar, and typographical errors before handing it in. Your paper will be evaluated for both content and usage.

Questions: Call Mrs. Williams during the summer on her cell at 503-502-0483 or at School (during the school year) at 503-667-3186 Ext. 1075 or or e-mail at: Tracey_Williams@reynolds.k12.or.us

Thank You Letter Sample

(business letter format)

(2 – 2 ½ top margin)

March 10, 2008

Mr. Eric Bailey
1234 SE 242nd
Troutdale, OR 97060

Dear Mr. Bailey:

Thank you for taking the time out of your busy work schedule to provide me the job shadowing experience on January 18, 2008.

I found the tour of the facility and the career related information you shared to be extremely valuable. Being able to talk to other accountants helped me realize my career goals and the kind of company I would like to work for someday. I specifically enjoyed attending a staff meeting to experience some of the every day issues that can arise in an office setting. Thank you for answering all of my questions; the information was very educational.

I thank you again for your generosity and patience in helping me explore my career path.

Sincerely,

Emily Smart
Business student
Reynolds High School
1698 SW Cherry Pk. Rd.
Troutdale, OR 97060

End of Internship Checklist for Students

Turn in the following items with your written report. You may bind the items in whatever way you see fit but evaluation can be completed more quickly if you put the items in the order listed below.

Check when done	Items you must include:	Advisor Evaluation:		
		Missing	Needs Revision	Completed
	Internship Checklist			
	Reflection (can be sent electronically)			
	Time Report—completed and signed by employer			
	RHS WBE Career-Related Learning Plan Evaluation			
	Copy of the thank you note you sent/gave to your supervisor (can be sent electronically)			
	Worksite supervisor's business cards			
	Picture of you, your supervisor and workplace (can be sent electronically)			

Check if included	Items you may also include:	Advisor Comments:
	A letter of recommendation written by your employer	
	Miscellaneous documents shared with you by employer	

Please take a few moments to provide feedback for CAF and write overall comments regarding your internship experience below:
