

**Application for Undergraduate Internship
School of Journalism and Mass Communication
Texas State University**

Fall _____ Spring _____ Summer _____

2d Eight Weeks _____

Please print carefully or type:

Form Revised: 03/2020

Name _____

Street Address _____

City: _____ State: _____ Zip _____ TXST Email: _____

Telephone Number _____ TX State ID # _____

Mass Communication Major: _____ Minor: _____

Total hours completed _____ MC hours completed _____ TX State grade point average _____

Have you earned full-major status – (Yes / No) _____ Currently taking classes? (Y/N) _____

MC courses completed:

Attach a copy of your unofficial transcript to the application which you can print from CATSWEB.

Number of credits requested for the internship:

Please note you cannot receive more than 6 credit hours total for all internship experiences as an undergraduate.

1 hour (MC 4130) _____ 2 hours (MC 4230) _____ 3 hours (MC 4330) _____ Grad: (MC5330) _____
min. 100 hrs/semester min. 150 hrs/semester min. 180 hrs./semester min. 180 hrs/sem

With higher minimum work hours, students may qualify for 4, 5 or 6 hours of credit in a given semester.

Submit the Internship Application (1st page) **and** Internship Agreement (2nd page) document via email to Chuck Kaufman (ck17@txstate.edu). REMEMBER to submit a copy of your unofficial transcript with the application.

For more information, contact Chuck Kaufman, Internship Coordinator, ***You will not be able to register for an internship class until all paperwork has been submitted. You will be notified by email that you are clear to register for the course.***

For Office Use Only:

SJMC Office check for FMS Yes _____ No _____ Signature & Date: _____

Credit student has already earned for internship(s) _____ Remaining credit left _____

Cleared for MC Course(s) _____ Processed By & Date _____

TEXAS STATE UNIVERSITY
SCHOOL OF JOURNALISM AND MASS COMMUNICATION
INTERNSHIP AGREEMENT

Student's Name _____	Organization's Name _____
Address _____	Supervisor's Name _____
City _____	Address _____
State _____ Zip _____	City _____
Phone _____	State _____ Zip Code _____
Email: _____	Phone _____
	Email _____

Outline your goals for this internship in terms of the development of professional skills, learning new information and personal development:

A. AGENCY (ORGANIZATION RECEIVING AN INTERN)

Nature of Internship (duties, responsibilities)

Semester _____ Year _____ Dates of internship _____

Days _____ Hours _____

Paid _____ or Unpaid _____ internship If paid, amount \$ _____

Describe how the student will be supervised.

This agency agrees to accept the above named student as an intern for the time and with the duties and supervision as indicated above:

Agency Supervisor Signature: _____ Date: _____

B. INTERN

I agree to work as an intern at the above named agency at the duty schedule described in "A", _____ with pay _____ without pay. I have been informed of and agree to the duties, responsibilities and nature of the work. Credit for the internship is graded as A, B, C, D or F. Students may receive an Incomplete (I) until required written Internship materials are submitted. I understand that evaluation will be done by the internship coordinator as described in the internship policy.

Intern Signature: _____ Date: _____

C. FACULTY INTERNSHIP COORDINATOR

I have agreed to the placement of the above named student with this agency under _____ the conditions described in "A."

Faculty Coordinator Signature: _____ Date: _____

Mr. Charles Kaufman

This internship may be terminated upon the mutual agreement of the Agency and the University.

INTERN EVALUATION
(To be completed by primary work site supervisor)

NAME OF INTERN: _____

TYPE OF POSITION: _____

NAME OF PERSON COMPLETING FORM: _____

POSITION OF EVALUATOR: _____

Please indicate below a **rating of 1-5 (lowest to highest)** on each of the traits listed as you experienced the intern. The definition that follows the category is the acceptable behavior (3) and superior or substandard behavior should be graded according to the deviation from this norm. Please add comments whenever possible, since this will aid the University faculty in final evaluation of the student's performance.

1. *Job Knowledge* (Good knowledge of duties or average learner of duties. Tries to be well informed. Occasionally needs direction.)

2. *Quality of Work* (Meets basic requirements of accuracy and neatness; average quality of work; needs normal supervision. Spelling, grammar, and expression clear and accurate.)

3. *Attendance* (Seldom absent or tardy. Reports absence or tardiness in advance.)

4. *Quantity of Work* (Works at a steady pace. Meets basic requirements and deadlines.)

5. *Attitude* (Tries to cooperate. Usually agreeable and obliging. Takes constructive criticism well.)

6. *Versatility* (Able to perform several related tasks simultaneously. Has ability to respond quickly to changing priorities, deadlines, and contingencies. Handles new assignments with normal difficulty.)

7. *Initiative* (Conscientiously performs routine assignments. Will accept new responsibilities.)

8. *Time Management* (Accomplishes average amount of work. Plans adequately.)

9. *Personal Appearance* (Dresses adequately for nature of assignments. Generally neat and clean. Presents an acceptable image.)

10. *Assertiveness* (Generally has a good self-concept. Persistent when convinced of appropriateness but willing to yield to evidence or requirements. Willing to ask questions and not intimidated by authority.)

Please give an overall rating for this student intern and comment briefly on how he or she ranks compared to other interns you have had from this department or other similar departments at other schools.

Elaborate on any specific strengths or weaknesses you have found in this intern's performance.

Internship Supervisor's Signature: _____ Date _____

As soon as the internship is completed, please **send this document directly to. You are welcome to share your comments with the student. Your option:**

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