

**College of Health & Human Services**

**School of Health Science**

**HLTH 480**

**Internship In**

**Public Health**

Revised 8/2021

**HLTH 480 – Internship in Public Health**

Practical health education experience under the supervision of a local, professional mentor and university supervisor. **A minimum of 450 supervised hours of service in a community-based health setting is required**.

# Introduction

Public Health majors are required to complete an internship at a Salisbury University approved health facility or program site. As the field of health enhancement encompasses many different organizations in diverse settings, the actual sites for internships will vary. Some settings that are appropriate for an internship may include government health departments, corporate health programs, hospital-based wellness programs, physician-based health care facilities, rehabilitation programs, and non-profit health related agencies. The Salisbury University Public Health Internship Manual describes the nature of the Public Health Major at Salisbury University, the associated internship experience, as well as the responsibilities of the student, the University, and the participating internship site.

Public Health students receive a solid academic foundation in the Foundations of Health Education, Health Behavior, Chronic & Communicable Diseases, Drug Education, Health Literacy and Communication, Nutrition, Human Sexuality, Planning & Assessing Health Education Programs, Measurement and Evaluation of Health Programs, Principles of Epidemiology, Senior Seminar in Public Health Education, and U.S. Healthcare and Public Health Policy. The **450-hour** internship, at an approved site, is completed during the student’s final semester. Coursework is designed to enhance the student's competency in mastery of essential needs assessment techniques, overall content knowledge, and communication in verbal and written form. The curriculum has been designed to address the Areas of Responsibility of a Certified Health Education Specialist (CHES), as outlined by the National Commission for Health Education Credentialing (NCHEC).

**Responsibilities:**

# The University will:

1. Approve internship placements in consultation with the student and the Company/Agency.
2. Provide the student and the Company/Agency with a Public Health Internship Manual.
3. Assign a University Public Health Supervisor to carry out the responsibilities of the University with respect to the internship.
4. In consultation with the Company/Agency supervisor, evaluate the internship experience and the student's performance, and assign the student's final grade for the internship.
5. Contact the Company/Agency supervisor and the student either by telephone or e-mail.

**6.** Provide the Company/Agency supervisor with contact information in case the university needs to be notified of events transpiring with an intern.

# The Health Company/Agency will:

1. Assign a professional health educator to serve as the on-site supervisor to work closely with the intern.
2. Develop a written job description for the internship with a weekly assignment schedule with specific learning objectives for each week.
3. Help the intern identify and carry out a project that will positively impact the Company/Agency program.
4. Integrate the intern into the daily operation of the program as much as possible.
5. Involve the intern in tasks reflective of the National Commission of Health Education Credentialing (NCHEC) Areas of Responsibility (see <http://www.nchec.org/_files/_items/nch-mr-tab3-> 110/docs/areas%20of%20responsibilities%20competencies%20and%20sub-

competencies%20for%20the%20health%20education%20specialist%202010.pdf )

1. Ensure that the internship is a minimum of 450 hours.
2. Discuss evaluation procedures with the intern at the beginning of the internship experience.
3. Sign the student’s bi-weekly activity log (**Appendix F**).
4. Send written evaluations of the student(s) performance to the University Coordinator at the mid-term point and at the completion of the internship experience (**Appendix E**).
5. Communicate with the University supervisor immediately concerning any major problems that may arise.

# The Intern will:

1. Enroll in HLTH 480: Internship in Public Health when they have reached at least 90 credits hours, **completed all of the required major courses,** **and have at least a 2.5 GPA**.
2. Complete and return this packet to the SU Public Health Internship Coordinator **prior** to the first day of the student’s internship experience. Any questions or concerns regarding this Agreement should be directed to the SU Coordinator. **NOTE: Beginning 9/2017 students should submit their completed internship packet (Appendix A, Appendix B, and Appendix C) and additional materials (a copy of your CPR/First Aid certification and note from your primary care provider or the Student Health Center stating that you are up to date with your immunizations) based on the following schedule:**

|  |  |
| --- | --- |
| **Taking Internship course** | **Due Date for Internship Packet and Supporting Materials** |
| Fall | June 30st |
| Spring | October 31st |
| Summer | March 31st |

Remember, students cannot start earing hours toward their internship until the SU Public Health Internship Coordinator has received the required documents and cleared the student to start.

# OBTAIN FORMAL APPROVAL BY THE UNIVERSITY COORDINATOR PRIOR TO BEGINNING THE INTERNSHIP EXPERIENCE (to ensure eligibility and approval of site)

# In conjunction with the Internship Site Supervisor, design and/or carry out programs during the internship experience that reflect NCHEC’s Areas of Responsibility (see <https://www.nchec.org/responsibilities-and-competencies>

1. Communicate with the University supervisor immediately concerning any major problem that may arise.
2. Inform the University supervisor of the mailing/site address, e-mail address, and telephone number where they may be reached during the internship.
3. Complete a minimum of 450 hours for the internship experience.
4. Obtain the total required internship hours at a maximum of **3** internship sites
5. Complete and submit bi-weekly progress logs evidencing hours earned at internship site and signed by Internship Site Supervisor (**Appendix F**).
6. Complete and submit bi-weekly reflections of internship experience (see **Appendix F** for log template)
7. Attend at least 2 out of 3 scheduled virtual meetings with the Salisbury Public Health Internship Coordinator during the semester.
8. Complete and submit the student Self Evaluation form at the end of the semester (**Appendix G**).
9. ACT IN A PROFESSIONAL MANNER as a representative of the Public Health Program at Salisbury University.

# Grading:

**Beginning Fall 2020**, the grading system changed from Pass/Fail to A, B, C, D or F. Grading is contingent upon satisfactory completion of **all** of the above requirements and expectations. Grading will be based on a total of 100 points. The 100 points will consist of submission of bi-weekly logs, participating in 2 of the 3 class calls, submission of the final PowerPoint, midterm and final term supervisor’s evaluation, student self-evaluation and the preceptor’s assessment of what the final grade should be.

# INTERNSHIP GUIDELINES

**Attendance**

1. The internship will officially begin on the date as noted on the agreement, designated by the SU Public Health Internship Coordinator and the professional health internship supervisor. Students will be notified by the SU Internship Coordinator and the internship supervisor of this date, in advance, to make appropriate plans to begin the internship.
2. The student will follow a schedule mutually agreed upon by the SU Public Health Internship Coordinator, internship supervisor, and the student.
3. The internship will conclude on a mutually agreed upon date. This date will be agreed upon by the SU Internship Site Coordinator, professional health internship supervisor and the Intern.

# Dress Code and Required Attire

Appropriate dress will be determined by the supervisor at each site. It is the expectation of the entire Salisbury University Public Health Program that the intern will dress appropriately and professionally at all times. This includes not only clothing appearance, but also professional grooming and hygiene (i.e. hair, nails, footwear with socks, earrings, tattoos, etc.). Students must adhere to the Dress Code of their internship site**.**

# Evaluations

Interns will be formally evaluated by their internship supervisors two times, with the first occurring approximately half way through the experience & the second occurring upon completion of the **450** **hours**. It is expected that the internship supervisor will review these evaluations with the intern. The internship supervisor may contact the SU internship Coordinator to discuss the outcomes of these evaluations.

# Submission of Bi-Weekly Logs

Interns will electronically submit progress reports every two weeks to the SU Internship Coordinator. Interns are responsible for acquiring Internship Site Supervisor’s verification of calculated contact hours earned. In addition, interns will complete self-evaluations and submit electronically with the bi-weekly logs. Specific due dates will change each semester, and therefore will be determined by the SU Internship Coordinator. **Failure to submit the bi-weekly logs by the date/time determined by the SU Internship Coordinator will result in a 2-point reduction.** This deduction will occur EACH TIME the log is late. At the conclusion of the internship students will be required to submit a formal assignment (PowerPoint) summarizing the experience and its connection to one or more of the health education competencies.

# Termination of the Internship Experience

If at any point throughout the internship experience the affiliate site supervisor requests the experience be terminated, the intern, internship supervisor, and Public Health Internship Site Coordinator will meet to discuss the rationale for termination. The results of this meeting will be used to determine if the student intern is allowed to continue the internship experience, is required to change sites for continuation of the experience, or obtains a grade of “I” or “F” for the course. Each case will be handled on an individual basis. It is highly encouraged for all parties involved to notify the Public Health Internship Supervisor as soon as problems arise at the internship site in order to address concerns immediately. **Please note**: **Students who falsify timesheets will receive an automatic “F” for the course and will have to repeat the course as well as face potential University disciplinary actions up to and including expulsion.**

**Statement of Risk Notice to Students Registering for Clinical/Experiential Activities Regarding COVID-19 (July 2020)**

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend d social distancing and have, in many locations, prohibited or limited the congregation of groups of people.

Salisbury University (the “University”) provides clinical placement and experiential opportunities for students in its health professions and other academic programs. For many CHHS programs, clinical and experiential activities (i.e., field placements, internships, simulations, and other hands-on learning activities) are an essential part of the curriculum and a mandatory prerequisite for completing a course of study and obtaining a degree.

Despite having put in place preventive measures to reduce the spread of COVID-19, the University cannot guarantee that a student will not become infected with COVID-19 when on the University campus or when participating in clinical/experiential activities at an off-campus location. It should be noted that attending clinical/experiential activities could increase a student’s risk of contracting COVID-19. The University does not maintain authority or control over, and cannot assume responsibility for, the safety practices and procedures of facilities where students participate in clinical/experiential activities.

Further, the University will begin controlled re-opening of clinical/experiential activities in accordance with campus guidelines and in consultation with the CHHS Dean and the Provost. Re-opening decisions may be made on a program by program basis and opportunities may be limited. Clinical and experiential placements will be authorized on a student-by-student basis, considering the extent of opportunities available and those students most in need of clinical or experiential engagement in order to complete a course of study without undue delay. Decisions will take into account the measures needed to limit risk to students as well as risks to patients, clients, faculty and staff and the public.

Before engaging in clinical/experiential activities, students should inform themselves fully of the risks. Students should consider the contagious nature of COVID-19 and the risk that they may be exposed to or infected by COVID-19 by attending clinical/experiential activities and that such exposure or infection may result in personal injury, illness, permanent disability, and death. The risk of becoming exposed to or infected by COVID-19 at clinical/experiential activities may result from the actions, omissions, or negligence of the student and others, including, but not limited to, clinical staff, volunteers, and patients and their families. Even absent such negligence and if all parties involved in a clinical rotation exercise reasonable care to mitigate the risk of exposure to COVID-19, a student may be exposed to COVID-19 and become infected.

A student who wishes to receive more information or who wishes to defer participation in clinical/experiential activities due to COVID-19 risks should promptly contact their program chair. Students are reminded that clinical/experiential activities are required for academic progression and are necessary to obtain a degree.

**COVID-19 Vaccine Requirement for Public Health Students**

The COVID-19 vaccine is required for all SU public health students enrolled in HLTH 480: Internship in Public Health. Those students that are non-compliant with the USM COVID-19 Vaccine Mandate are **not permitted** to participate in this internship. Compliance means that a student is either fully vaccinated or has an approved medical or religious exemption. Unvaccinated students with exemptions will be required to participate in twice-weekly COVID-19 testing in order to maintain access to Salisbury University’s main campus and a rapid COVID-19 test every two weeks for our satellite campus at USMH. **Students should be aware that internship sites are not required to recognize SU’s exemptions. As a result, unvaccinated students, including those with exemptions, may not be allowed to complete internship.**As with other immunizations that hospitals and other sites require students to have, failure to have the COVID-19 vaccine can result in the internship site refusing to allow the student to participate. Students must be informed that, while they can enroll in public health or other CHHS programs, they may not be able to complete the program due to lack of required clinical hours.

If you decide that you would like to get vaccinated or learn more about the vaccines that are available, please contact [CampusHealth@salisbury.edu](mailto:CampusHealth@salisbury.edu).

**Checklist for Internship Documents**

Below is a checklist of documents that must be submitted to the Internship Coordinator by the designated due dates. This checklist **does not** take the place of students reading the Internship packet.

□ Summitted Signed Appendix A (Internship Agreement Affiliate Site agreement)

□ Summitted Appendix B (Student Contact Information)

□ Summitted Signed Appendix C (Application for Admission to Internship in Public

Health)

□ Summitted current CPR/First Aid certificate

□ Summitted documentation from your healthcare provider that you are up to date with your

immunizations

Please note if your site requires a background check or drug test, you will need to arrange those procedures and submit the documentation to the site.

As a reminder all items are due according to the schedule below:

|  |  |
| --- | --- |
| **Taking Internship course** | **Due Date for Internship Packet and Supporting Materials** |
| Fall | June 30st |
| Spring | October 31st |
| Summer | March 31st |

**APPENDICES**

**Appendix A**

**Salisbury University Public Health Internship Agreement**

# SALISBURY UNIVERSITY PUBLIC HEALTH INTERNSHIP AFFILIATE SITE AGREEMENT

**We have communicated**

**COMPANY/AGENCY NAME (PRINTED)**

# with to the extent

**INTERN'S NAME (PRINTED)**

# necessary and agree to supervise him/her in an internship experience as described in the Salisbury University Public Health Internship Manual.

**The above intern's immediate supervisor at the internship site will be**

**and can be reached at**

**INTERNSHIP SITE SUPERVISOR’S NAME (PRINTED)**

**TELEPHONE NUMBER**

**E-MAIL ADDRESS**

# The internship will begin on

**(DATE)**

# and will be completed by

**(DATE)**

# COMPANY/AGENCY REPRESENTATIVE'S:

**SIGNATURE DATE**

**If this is a new internship site, the University must establish a formal agreement with the organization before you can begin at the site. Please plan accordingly. The following additional information is required (Please print clearly)**:

Name of person who has signature authority for the organization:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title of signer:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Company Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Government or Non-government agency:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Profit or Non-Profit Agency:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is a drug test required?\_\_\_\_\_\_\_\_

Is a background check required?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Appendix B**

**Student Contact Information**

# FOLLOWING ARE THE CORRECT ADDRESSES AND TELEPHONE NUMBERS WHERE I MAY

**BE CONTACTED DURING MY INTERNSHIP. (Print clearly or type) INTERNSHIP SITE (Include the Name and Address of the Site along with the Supervisor’s Name, Telephone number, and email address):**

**RESIDENCE DURING INTERNSHIP:**

**STUDENT E-MAIL ADDRESS:**

**Appendix C**

**Salisbury University Application for Admission to Internship in Public Health**

**SALISBURY UNIVERSITY**

**APPLICATION FOR ADMISSION TO INTERNSHIP IN PUBLIC HEALTH**

**TENTATIVE INTERNSHIP SEMESTER**

**Name Student ID#**

**Home Address**

**Telephone #**

**Local Address**

**Telephone #**

**Cumulative GPA**

**Advisor’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Record your final grade for each of the courses below:

HLTH 110 Foundations of Health Education 4 \_\_\_\_\_\_

HLTH 225 Health Behavior 4 \_\_\_\_\_\_

HLTH 230 Chronic & Communicable Diseases 4 \_\_\_\_\_\_

HLTH 311 Human Sexuality 4 \_\_\_\_\_\_

HLTH 312 Drugs and Public Heath 4 \_\_\_\_\_\_

HLTH 315 Community Nutrition 4 \_\_\_\_\_\_

HLTH 325 Planning & Assessing Health Ed Programs 4 \_\_\_\_\_\_

HLTH 326 Measurement and Evaluation of Health Program 4 \_\_\_\_\_\_

HLTH 330 Principles of Epidemiology 4 \_\_\_\_\_\_

HLTH 361 Health Communication 4 \_\_\_\_\_\_

HLTH 450 U.S. Healthcare and Public Health Policy 4 \_\_\_\_\_\_

HLTH 479 Senior Seminar in Public Health 4 \_\_\_\_\_\_

# Signature of Approval \_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

SU Public Health Internship Site Coordinator

**Appendix D**

**Sample Introduction Email**

Good afternoon \_\_\_\_\_\_\_\_\_\_,

My name is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. I am a senior Public Health major at Salisbury University. As a final course, all Public Health majors must complete a 450 hour internship which allows students to not only obtain hands on experience in public health but also demonstrate their skills in the core health education competencies. I am reaching out to your organization because **INSERT WHY HERE examples could include – my future professional goals include working in a setting similar to your organization, etc. YOU might want to add information about your interests and how it connects to their organization, etc. In the past, your site has hosted an intern from Salisbury University**. **I am contacting you today to inquiry if you have any intern positions available or if I can meet with you to discuss the possibility of me interning with your organization.** I have attached my resume to this email. Look forward to speaking with you soon.

Sincerely,

This is a sample, something to help get you started with your introductory email. I suggest that you tailor the email to your needs. Items in red are just examples of how you might approach the email.

**Appendix E**

**Salisbury University Public Health Internship**

**Site Supervisor Evaluation Form**

# SALISBURY UNIVERSITY

**Public Health Internship Evaluation Form**

**This form will be completed by the Internship Site Supervisor twice during the intern’s experience, midterm and final evaluations. When completed, please submit to the SU Internship Coordinator’s email address.**

Intern’s Name: Date:

Supervisor: Internship Site:

Please evaluate the student intern according to the following scale:

# 1=Unacceptable 2=Below Average 3=Average 4=Above Average 5=Outstanding

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| ***Personal Qualities*** | | | | | |
| Personal appearance | 1 | 2 | 3 | 4 | 5 |
| Professional dress | 1 | 2 | 3 | 4 | 5 |
| Initiative | 1 | 2 | 3 | 4 | 5 |
| Imagination/resourcefulness | 1 | 2 | 3 | 4 | 5 |
| Enthusiasm | 1 | 2 | 3 | 4 | 5 |
| Self-control, poise | 1 | 2 | 3 | 4 | 5 |
| Dependability | 1 | 2 | 3 | 4 | 5 |
| Cooperation | 1 | 2 | 3 | 4 | 5 |
| Maturity | 1 | 2 | 3 | 4 | 5 |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| ***Professional Qualities*** | | | | | |
| Awareness of duties and responsibilities | 1 | 2 | 3 | 4 | 5 |
| Ability to accept constructive criticism | 1 | 2 | 3 | 4 | 5 |
| Ability to work with peers | 1 | 2 | 3 | 4 | 5 |
| Ability to work with clients/participants | 1 | 2 | 3 | 4 | 5 |
| Punctuality | 1 | 2 | 3 | 4 | 5 |
| Attendance | 1 | 2 | 3 | 4 | 5 |
| Oral skills | 1 | 2 | 3 | 4 | 5 |
| Written skills | 1 | 2 | 3 | 4 | 5 |
| Shows initiative | 1 | 2 | 3 | 4 | 5 |
| Works independently | 1 | 2 | 3 | 4 | 5 |
| Demonstrates effort to improve | 1 | 2 | 3 | 4 | 5 |
| Planning and decision-making skills | 1 | 2 | 3 | 4 | 5 |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| ***Professional Qualities*** | | | | | |
| Capable of promoting professional health enhancement programs | 1 | 2 | 3 | 4 | 5 |
| Displays leadership in capacity in which he/she is working | 1 | 2 | 3 | 4 | 5 |
| Displays proper attitude toward work | 1 | 2 | 3 | 4 | 5 |
| Stays within legal, moral, and professional boundaries | 1 | 2 | 3 | 4 | 5 |
| Demonstrates professionalism at all times | 1 | 2 | 3 | 4 | 5 |
| Effective in organizing and presenting ideas | 1 | 2 | 3 | 4 | 5 |
| Professionally prepared to execute duties necessary for placement in the field | 1 | 2 | 3 | 4 | 5 |
| Possesses knowledge of current national policies in the health field | 1 | 2 | 3 | 4 | 5 |
| Possesses thorough understanding of the field and its diversifications | 1 | 2 | 3 | 4 | 5 |
| Has ability to evaluate programs and make long range plans | 1 | 2 | 3 | 4 | 5 |
| Recognizes problems associated with health enhancement program administration | 1 | 2 | 3 | 4 | 5 |
| Compares favorably to other quality interns in the past | 1 | 2 | 3 | 4 | 5 |
| The intern was an asset to your program | 1 | 2 | 3 | 4 | 5 |
| Assessment of the intern for today’s job market | 1 | 2 | 3 | 4 | 5 |

## Strengths:

***Areas of Improvement:***

***Additional Comments:***

**This section should be completed by the site supervisor at the end of the Internship**.

1. Did your organization benefit from having a Public Health Intern this semester?

🞎 No

🞎 Yes (please indicate below the primary benefits you received. Check all that apply.)

🞎 Completed at least one specific task that you otherwise would not have been able to complete

🞎 Met a project deadline that you otherwise would not have been able to meet

🞎 Afforded your organization the opportunity to help a larger number of people

🞎 Helped foster better community relations

🞎 Helped foster a working relationship with Salisbury University

🞎 Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Do you think the student was adequately prepared for the internship? (Please explain)
2. What grade (A, B, C, D, F) would you give the student? (Please explain)
3. Would you consider this person for hire? (Please explain)

🞎 Yes

🞎 No

1. Will you accept SU Public Health students next semester?

🞎 Yes

🞎 No (Please tell why)

***Supervisor’s Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

Thank you for taking the time to conduct this evaluation on the Intern. Please note the completed evaluation will be shared with the student intern. Please contact the SU Internship Coordinator with any questions/concerns.

**Appendix F**

**Bi-Weekly Activity Log**



# PUBLIC HEALTH INTERNSHIP

# BI-WEEKLY ACTIVITY LOG

Name

Week of \_ to

Internship Location

Site Supervisor

## PART I – Hours Interned

|  |  |  |
| --- | --- | --- |
| Week | Date | Hours |
| Monday |  |  |
| Tuesday |  |  |
| Wednesday |  |  |
| Thursday |  |  |
| Friday |  |  |
| Saturday |  |  |
| Sunday |  |  |
| **TOTAL HOURS** |  |  |

|  |  |  |
| --- | --- | --- |
| Week | Date | Hours |
| Monday |  |  |
| Tuesday |  |  |
| Wednesday |  |  |
| Thursday |  |  |
| Friday |  |  |
| Saturday |  |  |
| Sunday |  |  |
| **TOTAL HOURS** |  |  |

# PART II – Description of Past 2 Weeks’ Experiences

Primary Assignments and Responsibilities Performed

Skills and Knowledge Used

Area(s) of CHES Responsibility met

Observations (Experiences that were interesting and/or beneficial to your professional development)

**PART III – Overall Bi-Weekly Reflection** (in the past 2 weeks) Evaluation of Your Overall Performance

Strengths and Areas of Improvement

Goals for the Next 2 weeks

Student’s Name (Print)

Student’s Signature Date

Site Supervisor’s Signature Date

**Appendix G**

**Salisbury University Public Health Internship**

**Student Self-Evaluation Form**

**Student Self-Evaluation Form**

**Public Health Internship**

Please answer the following questions and return the completed form with your report to the instructor by the end of the semester.

**Student’s Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I interned at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name of agency)

from \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

1. Did you benefit from participating in the internship?

🞎 No (skip to Question 4)

🞎 Yes

2. Please indicate below the primary benefits you received. (Check all that apply.)

Academic

🞎 Learned something new about my major or minor field

🞎 Provided me with a real-life application of what I learned in the classroom

🞎 Strengthened my analytical and critical thinking skills

🞎 Allowed me to use what I have learned inside the classroom to meet community needs

🞎 Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Personal

🞎 Strengthened my interpersonal and communication skills

🞎 Exposed me to diverse populations

🞎 Enhanced my sense of civic responsibility

🞎 Contributed to my intellectual, social, and personal growth

🞎 Promoted my leadership development

🞎 Allowed me to serve as an involved citizen in the community

🞎 Helped me decide to pursue a career in public health

🞎 Helped me decide what career I wanted to pursue after graduation (besides public health)

🞎 Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Please indicate below your level of satisfaction with the internship experience

**Characteristics Poor Satisfactory Excellent**

a. Relation to course work \_\_\_\_ \_\_\_\_ \_\_\_\_

b. Site supervisor \_\_\_\_ \_\_\_\_ \_\_\_\_

c. Required time to perform service \_\_\_\_ \_\_\_\_ \_\_\_\_

d. Working conditions \_\_\_\_ \_\_\_\_ \_\_\_\_

e. Met expectations \_\_\_\_ \_\_\_\_ \_\_\_\_

f. Opportunity for creativity \_\_\_\_ \_\_\_\_ \_\_\_\_

g. Met course objectives \_\_\_\_ \_\_\_\_ \_\_\_\_

h. hours of service \_\_\_\_ \_\_\_\_ \_\_\_\_

4. Please indicate the extent of your **overall** satisfaction with your internship experience.

🞎 Very Pleased

🞎 Pleased

🞎 Somewhat Displeased

🞎 Very Displeased

5. Do you think you were adequately prepared for the internship experience?

🞎 Yes

🞎 No (Please explain)

6. How much did you learn from your internship experience?

🞎 More than expected

🞎 As expected

🞎 Less than expected

7. Please provide any additional comments about the placement experience in the space below.

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_