A picture containing laptop, indoor, sitting, dark

Description automatically generated

**INTERNSHIP AGREEMENT**

**INSTRUCTIONS:** This signed agreement is required once you have received official approval to register in one of the field practicum courses (PH 497/650/750/850). Upon approval you will receive instructions from the Applied Practice Advisor to upload this document to Canvas **PRIOR** to starting your internship.

## No handwritten agreements will be accepted

## Complete ALL sections

## Original or *electronic* signatures are OK

**DATE\_**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**STUDENT INFORMATION**

First Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ID#\_\_\_\_\_\_

Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Degree\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Concentration (MPH/MS only)\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Degree Type: Traditional Online MPH

Expected Graduation (Semester/Year)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**COURSE CREDIT INFORMATION**

Course (PH 497/650R/650/750/850)\_\_\_\_\_\_\_\_\_\_ Credit Semester/Year\_\_\_\_\_\_\_\_\_\_\_\_\_

*Online Program Only*: Cohort \_\_\_\_\_\_\_\_\_ Block \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Faculty Advisor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**APPLIED PRACTICE SITE INFORMATION**

Organization/Company/Business Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Department/Branch/Unit Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Primary Work Site Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Primary Supervisor Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supervisor Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**INTERNSHIP/PRACTICUM INFORMATION**

Estimated Start Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Estimated End Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Practicum Type: New internship Continued internship Employee

Compensation Type: Paid Unpaid Expected Hours Per Week\_\_\_\_\_\_\_

1. **FIELD SITE DESCRIPTION** – Provide overview of the busines/organization/agency mission, key programs/services, etc. Include name of specific department or project you will be working with.
2. **LEARNING OBJECTIVES –** Provide at least three learning objectives you have for this experience. What are you hoping to learn?
3. **PUBLIC HEALTH COMPETENCIES: Enter the competencies this internship will help you attain.** *Undergraduates and graduates must choose at least three FOUNDATIONAL competencies and graduates must select an additional two division-specific competencies that your internship will help you achieve.* ***See Undergraduate and Graduate Requirement sections:***[*https://gsph.sdsu.edu/fieldpractice/index.php*](https://gsph.sdsu.edu/fieldpractice/index.php)

**1.**

**2.**

**3.**

**Division-specific Competencies (MPH students only)**

**4.**

**5.**

1. **SUMMARY OF PLANNED ACTIVITIES TO BE COMPLETED:** Provide an overview of the project, program or department you are working on.Include key duties & activities. **NOTE:** *It is to be expected that some duties will be clerical in nature; however, a majority of your duties (approx. 70% of your time) should be aligned with the competencies you list above)*
2. **KEY PRODUCTS/DELIVERABLES (MPH only):** List at least two planned products you will develop during your internship. You will be asked to upload these products at the end of your internship for evaluation by your faculty advisor. ***Examples include****:* Resource Directory, Survey or Questionnaire, Outreach Plan, Research Report/Paper, Protocol or Guide, etc. **See other** [**MPH Examples**](https://gsph.sdsu.edu/fieldpractice/MPH%20Overview%20of%20Competencies.pdf)

**1.**

**2.**

**E. CONTRIBUTION:** Briefly describe how the combined activities tie into a project or contribute to services that will benefit the host organization.

**AGREEMENT**

The public health applied practice experience is an opportunity for students to apply public health academic theory and acquired skills from their degree program and concentration to community-based research and service in a practice setting.

The practice experience is a minimum 120 hour time commitment by the student. Required hours vary based on the program (BA, MPH, MS) and credit being requested by the student. The student is not allowed to count activities with a substantial amount of clinical or clerical work. Information on requirements and policies can be found here: <https://gsph.sdsu.edu/fieldpractice/index.php>

The student is to perform activities that allow the student to demonstrate attainment of [3-5 public health competencies](https://gsph.sdsu.edu/fieldpractice/forms.php) of which at least three must be foundational competencies and two learning objectives. The student will pursue assigned tasks on a semi-independent basis, under the general direction of the preceptor.

1. Student agrees to:

* Complete \_\_\_\_\_\_\_\_\_\_\_\_ hours of contact time in the agency
* Prior to starting work discuss SDSU School of Public Health internship/practicum requirements, assignment information/due dates and thesis/capstone opportunities if applicable.
* Exhibit professional, ethical and appropriate behavior by NOT (a) reporting to the field site under the influence of drugs or alcohol (b) giving or loaning money or other personal belongings to client or field site representative (c) giving a client or representative a ride in personal vehicle (d) engaging in behavior that might be perceived as harassment of a client or field site representative (e) engaging in behavior that might be perceived as discriminating against an individual on the basis of age, race, gender, sexual orientation, mental capacity, religion, immigration status, etc. (f) engaging in any type of business with clients during the term of placement (g) disclosing without permission the field site’s proprietary information, records or confidential information of any kind including clients; or (h) enter into personal relationships with a client or field site representative during the term of placement.
* Abide by the field site’s policies, standards of conduct and safety measures, including but not limited to (a) wearing any required personal protective equipment; (b) participate in all required trainings; (c) complete all assigned tasks and responsibilities in a timely and efficient manner; (d) communicate when unsure of instructions or protocols, in need of assistance/support or have concerns with project assignment or work environment (e) be punctual and notify the field site if late or absent
* Complete and forward to university faculty instructor/advisor all documentation by deadlines.
* **Notify Applied Practice Advisor** [**lcazares@sdsu.edu**](mailto:lcazares@sdsu.edu) **if there are concerns with meeting the terms of this agreement, if student has been discriminated against, harassed or injured while engaged in this learning activity.**

1. Site agrees to provide the following:

* Ensure that student is covered with General and Professional Liability insurance policy prior to starting work. This can be done in one of three ways (a) Service Learning Agreement between site and SDSU School of Public Health is on file: <https://bfa.sdsu.edu/financial/procurement/servlearning.aspx>

(b) employer-based coverage if student is a paid employee (c) student purchases his/her own coverage (various companies offer student policies).

* Provide adequate workspace & access to necessary equipment
* Training and technical guidance for the practicum project
* Regular meetings for performance feedback and guidance
* Review and sign Log of Hours and complete midpoint/final evaluations
* Permission for student to submit at least two work products to the SDSU School of Public Health as required for accreditation.
* **Notify Applied Practice Advisor** [**lcazares@sdsu.edu**](mailto:lcazares@sdsu.edu) **if there are concerns with meeting the terms of this agreement, if student has been involved in an accident or ethical/legal incident while engaged in this learning activity.**

**By signing this document each party is agreeing to meet the expectations and guidelines for the applied practice experience at San Diego State University School of Public Health (SPH).**

**Please use electronic signatures, if possible.**

**Student Signature: Date:**

**Internship Supervisor Signature: Date:**