Alfred University

McComsey Career Development Center Experiential Education Program

Internship Proposal BUSI 485 Alfred University's Career Development Center and School of Business Internship Program encourages active and practical learning outside of the classroom. You will have opportunities to reflect on what you learn in the internship through the Bi-weekly Report and the Final Learning Report. In addition, you will have the opportunity to be evaluated (midpoint and final) by your site supervisor, allowing you to gain valuable insight for future growth as a result. Please check all that apply **☐** Summer Internship ☐ Spring Internship ☐ Fall Internship **Please Print** Student ID# Your Name (Last, First) Academic Major/Concentration/Overall Current GPA Permanent Mailing Address Email Address Telephone Number Campus Mailing Address Campus Number Cell Phone Number **Internship Site** Company Name Site Supervisor Name/Title Mailing Address Telephone/Fax/Email **Internship Dates** Beginning **Ending** (mm/dd/yyyy) (mm/dd/yyyy) # 0f Credits ___ Semester these Hours/Week Salary ☐ No credits will be applied **Duties & Responsibilities (List below or attach job description)**

According to the Social Change Model, leadership is viewed as a process rather than as a position. Participatory leadership, such as an internship, enhances student learning and development. This model is designed to enhance the development of leadership qualities; valuing self-knowledge, personal empowerment, collaboration and citizenship to foster positive social change. Please reflect on the core values (7 C's) of the Social Change Model listed below prior to starting your internship experience.

Individual	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1. Consciousness of Self : I am fully aware of the beliefs, values, attitudes, and emotions that motivate me to take action.		2	3	4	5
2. Congruence : I am seen as a person of integrity. I think feel, and behave with consistency, genuineness, authenticity, and honesty.	s, 1	2	3	4	5
3. Commitment: I am persistent in carrying out my goals	s. 1	2	3	4	5
Group	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
4. Collaboration : I am able to easily work with others in common effort; sharing responsibility, authority and accountability. I am able to trust and be trusted by the people with whom I work.	a 1	2	3	4	5
5. Common Purpose : I am able to work with and support the shared aims and values. It facilitates the group's ability to engage in collective analysis of the issues at hand and the task to be undertaken.	t 1	2	3	4	5
6. Controversy with Civility : I recognize that difference in viewpoint are inevitable and valuable and that such differences must be aired openly but with civility, respendence of the courtesy.		2	3	4	5
Community	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
7. Citizenship : To be a good citizen is to work for positive change on the behalf of others and the community. I believe I have a civic responsibility to the greater public	_	2	3	4	5
Change is the ultimate goal of the creative	Strongly	Disagree	Neutral	Agree	Strongly
process of leadership. It gives meaning and purpose to the 7 C's.	Disagree				Agree
8. Change : I have the ability to adapt to environments an situations that are constantly evolving, while maintaining the core functions of the group. Additional Comments:		2	3	4	5

Additional Comments:

By signing below, I accept this assignment and will put forth my best effort to achieve a satisfactory work experience. I have read and understand the School of Business Internship Guidelines. I am aware that I am required to submit the following written assignments to the Internship/Co-op Coordinator of Career Development in order to receive academic credit:

- a. Completed internship proposal
- b. Bi-weekly reports
- c. Copy of Thank you letter sent to site supervisor
- d. Final report (summary and response to 19 questions)

I authorize the release of information (e.g. GPA, transcript) to prospective employers for the purpose of arranging an internship. I authorize the release of information regarding my internship experience (e.g. final learning reports & evaluations) to employers, Alfred University Faculty/Staff members, parents or guardian(s), spouse, and other recipients.

Student Signature			Today's Date				
	part in this internship as described above	ribed in the School of Business I	nternship Guidelines. I have				
Internship Supervisor Sig	natura		Today's Date				
memsup supervisor sig	шине						
Internship/Co-op Coordinator, Career Development Center Signature			Today's Date				
Faculty Advisor Signature	e		Today's Date				
FOR OFFICE USE ONLY							
☐ Entered into Career Office	☐ Entered into Database	Contacted Site Supervisor					
Copied/Sent to Advisor	Date Sent:						
Site Visit Required	Date:						
Site Visit Notes/Comments							
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