

REHB 495:

Internship in Rehabilitation

Student Handbook, 2015-2016

**Rehabilitation Services
Rehabilitation Institute
College of Education and Human Services
Southern Illinois University
Carbondale, IL 62901-4609**

<http://ehs.siu.edu/rehab/undergraduate/rehab-services/index.php>

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Internship Policies and Procedures

Introduction

Internships are an integral part of the total educational experience of the Rehabilitation Services baccalaureate program. Through their internship, students deepen their understanding of human behavior and develop and enhance skills for working with people with disabilities.

Students entering their semester of internship **must register for 9 units of REHB 495, have senior standing, be admitted to the Rehabilitation Services major, and have an overall GPA of at least 2.25 as well as a GPA of at least 2.5 in their major coursework. Additionally, students must have completed all but ONE required REHB courses.** *Your undergraduate academic advisor will enroll you for the required credits, just as you register for any other class.*

The internship requires 450 hours of work (30 hours/week for 15 weeks) at the internship site and individual meetings. **These hours must be completed prior to finals week.**

Placement Process

The semester prior to their internship placement, students are required to attend a group meeting with the Internship Coordinator (IC) and all other internship students. The purpose of this meeting is to review the internship policies and procedures and to explore each student's area of interest with respect to the internship placement. At this meeting, students will complete an internship information form and review the résumé worksheet (see Appendix B). Students should complete the worksheet and use it to develop a résumé that they can take on the internship interviews.

Within 1-2 weeks after the group meeting, students should schedule individual meetings with the Internship Coordinator to confirm their interests. There are folders with descriptions and brochures from internship agencies available in the ICs office. Once the student has suggested 2-3 agencies where he/she would like to be placed, **the Internship Coordinator will contact the site to determine agency interest in having an internship student.** If the agency is willing to consider sponsoring a student, the SIUC coordinator will provide the student with the person to contact at the prospective agency, to set up the initial interview. **The student should *not* contact an agency about an internship without permission from the internship coordinator.**

Students are to treat this interview as if it were for a professional job. This includes taking their résumé and individualized objectives form. Additionally,

students are expected to dress appropriately. (i.e., No T-shirts, jeans, flip flops or athletic shoes.). If you are unsure of what constitutes interview attire feel free to contact the IC. **Students who are interviewing in a correctional setting should wear long pants and closed toe shoes.**

During this interview, students should ask about any required background checks, drug testing, or other required documentation to be allowed to complete an internship at the agency. Be advised that some agencies may have additional requirements. For example, some will require a background check, a urinalysis, a tuberculosis shot, full coverage car insurance, etc.

It is the student's responsibility to find out this information and to complete these requirements **prior to the start of the internship**. The SIU internship does not provide any assistance with these components. The student must make arrangements with the site to complete all paperwork, blood work (e.g., tuberculosis testing), background checks, drug testing, etc. Failure to complete all or pass any of the above listed components **may result in delayed enrollment in the internship, which may delay the semester in which the internship is completed.**

After the interview, the student is to contact and meet with the Internship Coordinator to report the outcome of the meeting. If the student and the agency agree to the placement, the Internship Coordinator will send a letter to the agency confirming the arrangement. A copy will be sent to the student.

The internship begins the first day of the semester. **Prior** to the first day of the semester, the Internship Coordinator will send a packet with the required paperwork for the internship (**this information is IN THE MANUAL** and can be downloaded from the Rehabilitation Administration website). **The student, and only the student, is responsible for printing out this paperwork and having the supervisor sign all paperwork in a timely manner** (see Appendix A, the Internship Checklist, for specific dates). **During the first week of the semester, students need to contact the Internship Coordinator to set an appointment to review goals/objectives and the permanent schedule.**

Permanent Schedule

When students first enter their internship placements, they are required to establish a permanent schedule (Appendix D). Students must work at least 30 hours per week (check with site to determine what times and days of week are acceptable to complete internship hours). This form is to be turned into the Internship Coordinator **no later than the second week of the semester.** If the

student's permanent schedule is changed, the student is responsible for contacting the Internship Coordinator to adjust the student's records. Students must complete all hours during the 15 weeks of the semester. This does NOT include Thanksgiving or Spring break. It also does not include finals week.

Failure to complete at least 30 hours per week during each of the 15 weeks may result in the student being unable to complete the required 450 hours in the allotted time frame. It is the student's responsibility to ensure that he or she is completing all of the necessary hours and to bring it to his or her supervisor's (AND the internship coordinator's) attention if any problems arise related to completing these hours.

Weekly Documentation

Students will be responsible for maintaining weekly time sheets identifying the hours worked that week at their internship. This form will also be used to report any activities that they are currently involved in, as well as any accomplishments for the week (See Appendix E).

In addition, students will be responsible for completing a weekly feedback sheet (See Appendix F). The purpose of this form is to provide the student with the opportunity to evaluate their internship experience on a weekly basis. Failure to send this form (in addition to the time sheet) makes it impossible for the internship coordinator to be aware of any issues students are having at the site. In the past, a few students who failed to turn in completed feedback forms were terminated from their site prior to the internship coordinator having any knowledge of the problems. Therefore, it is imperative that these forms be completed in a timely manner and honestly, so the internship coordinator can be kept aware of your efforts to solve the issue (see step 5 Responsibilities of the Rehabilitation Institute).

****ALL INFORMATION ON THIS SHEET WILL BE KEPT CONFIDENTIAL****

If the internship coordinator is not aware of the problems and your efforts to solve them, there is nothing the internship coordinator can do to help you avoid termination. Keep in mind that site termination is final - once it has happened, you have failed the internship. At that point, your only option is to begin work on your next internship experience for the next semester (hours will not be carried over and ALL requirements will need to be completed again. That is, you must completely re-do your entire internship experience.

The weekly timesheets and feedback forms are to be turned in together by Friday following the reporting week (i.e., within 7 days). Students may deliver these forms in person, fax them (to 618-453-8271), OR mail them to:

Internship Coordinator

**SIUC Rehabilitation Institute, Mailcode 4609
Carbondale, IL 62901-4609**

Students who choose to mail forms MUST mail them in a timely fashion so that they are received by the due date (mailed time sheets/feedback sheets that arrive late will be counted as late, regardless of any time stamp on the envelope). **Please note that the paperwork must be returned within 7 days of the week worked.** If the time sheet is more than **7 days late**, the hours worked for that reporting period **will not be counted**. It is STRONGLY recommended that students keep their own copy of the paperwork and keep track of their total hours throughout the semester.

Documenting Hours & Academic Dishonesty

Students must complete the required number of weekly work hours and provide documentation of such hours. Any student who fabricates, exaggerates or falsifies documentation of hours worked will not only fail Rehab 495, but will also face repercussions under the SIUC Academic Dishonesty code of conduct. It is the responsibility of the student to make himself/herself aware of the policies and procedures in the Student Code of Conduct pertaining to acts of academic dishonesty. These policies cover such acts as plagiarism, preparing work for another student, cheating by any method/means, falsifying or manufacturing data, furnishing false information to a university official relative to academic matters, and soliciting, aiding, concealing or attempting conduct in violation of this code. The student is also responsible for making him or herself aware of the associated sanctions. Issues of Academic Dishonesty as well as other standards of scholarship and conduct can be found in the Student Conduct Code:
<http://policies.siu.edu/documents/StudentConductCodeFINALMay32011.pdf>

Student Evaluations

The SIUC Internship Coordinator will conduct two formal evaluations of the student's progress during the semester (Appendix I). These will be conducted at the middle and end of the semester. Students and agency supervisor(s) will be involved in this evaluation process. The completed evaluations are reviewed and signed by all parties and entered into the student's file. Students will receive copies of all evaluations. Students will be given the opportunity to provide feedback about their internship experience at the end of the semester (Appendix M). **This form will need to be turned in with the Graduating Student Information Sheet (Appendix L) at the final evaluation in order for the student to pass the internship.**

In addition to the items shown on the evaluation form in Appendix H, students will be evaluated on individually identified objectives (Appendix C). The student, Internship Coordinator, and the agency representative will begin to develop these goals prior to the semester and the final objectives will need to be completed by the student, approved by the agency supervisor, and turned into the internship coordinator in the first week of the semester. *These individualized objectives are designed to meet the educational needs of the student for the entire semester, but may be modified to meet any unexpected changes that occur.*

Exemption from Internship

Absolutely no exemptions will be allowed for Rehabilitation Services students from REHAB 495: Student Internship. Each student must successfully complete the internship in order to graduate from the program. Previous work or volunteer experience in the field of rehabilitation will not be counted towards this requirement. No exceptions will be made.

Completing Internship at Current Place of Employment

Some students may already be working in some area of rehabilitation and request to complete their semester of internship at their place of employment. This arrangement is not recommended for two reasons. First, completing an internship at another site will provide students with a greater range of experience than they will gain if they remain at their place of employment. This will increase their marketability. Second, it may be difficult for the agency to remember to provide the student with bachelor's level experience instead of using them to fulfill the duties for which they are being paid.

Professional Conduct

The student's internship is considered a professional work experience. Students are responsible for all interactions with the agency to which they are assigned. It is critically important that students comply with agency rules and regulations, and respect the confidential nature of all agency and consumer records. **Failure to do so may result in immediate termination from the agency and the student will need to complete the internship the following semester.** In addition, students are expected to act in a professional and ethical manner as a representative of the agency (and SIUC) regarding any contact with consumers, colleagues, and the community.

Computer/Cell Phone Usage

Cell phones should be kept in backpacks, tote bags, purses, or other secure place and should be kept on vibrate or off while working at your internship site.

Texting or talking on your cell phone during internship work hours is not acceptable. If you need to contact someone, wait until your break or in the case of an emergency, talk to your supervisor. An agency may ask you to leave for the day or terminate your placement if you are found to be texting or talking on your cell phone during internship work hours. Additionally, agencies may have specific regulations regarding using personal laptops or agency computers. An agency may terminate an internship due to inappropriate use of technology at the workplace (e.g. Facebook, You Tube, etc.).

Dress Code

Men -

Grooming

Hair is neat, well-trimmed, clean, and free from dandruff.

Face should be well shaved, no nicks or blood, beard should be trimmed and neat.

Hands are clean and nails are properly trimmed, no ragged cuticles.

Basic Wardrobe

Dress conservatively.

Business casual (depending on the agency policy)

Shoes should in good condition; slip-on shoes are okay.

Adhere to the dress code policies of the agency.

Miscellaneous

Jewelry such as watches should be conservative. We caution students about wearing expensive jewelry to their internship site.

Personal Hygiene

Cologne should be minimal.

Shower or bathe every day; Use deodorant.

Brush teeth daily and use mouthwash.

Women -

Grooming

Hair should be clean; hairstyles should be neat and moderate.

Makeup should be light.

Hands should be clean; if manicured, nails should be kept in a professional manner.

Basic Wardrobe

Dress conservatively; zippers should lie flat, seams should have no raw edges, and there should be no loose threads.

Avoid skin-tight or see-through clothing, low necklines, and/or extremely short skirts.

Shoes should be in good condition and appropriate to setting.

Adhere to dress code policies of the agency.

Miscellaneous

Jewelry such as watches, earrings, necklaces, etc. should be conservative. We caution students about wearing expensive jewelry to their internship site.

Personal Hygiene

Perfume should be minimal.

Shower or bathe every day; Use deodorant.

Brush teeth daily and use mouthwash.

Conflict Resolution

Any student experiencing a difficulty within the internship placement is required to attempt to resolve the situation as soon as it presents itself. If a student has attempted to resolve the situation and the results of those efforts are unsatisfactory to the student, he/she should then make an appointment to meet with the SIUC Internship Coordinator as soon as possible for further assistance towards a solution.

If a student determines that the site is not a good match for him/her, the student may be allowed to find a new site and carry over their completed hours from the previous site if they meet the following criteria:

- a) It is not after the University's official add/drop deadline for that semester.
- b) The student has contacted and met with the agency supervisor and internship coordinator and attempted to resolve the conflict with the assistance of the internship coordinator. *If a student terminates placement of the internship prior to getting approval from the internship coordinator the student will receive a grade of WF (failure for students who do not officially withdraw from the class, ceased attending and failed to complete the requirements for the course) and have to wait until the following semester to complete the internship.*
- c) The agency has evaluated the student's performance as satisfactory up to that point. *If the student was evaluated as unsatisfactory at anytime during the internship by the agency the student will need to wait until the following semester to complete the internship.*
- d) The student has already been selected and approved to relocate to a new site. The student would also need to begin accruing hours at the new site by the University's official drop/add deadline for the semester.

Termination of Field Placement

Termination by SIUC Internship Coordinator

Academic dishonesty will not be tolerated. Reporting inaccurate hours worked will lead to the termination of the internship experience.

Termination by the Agency

The agency has the right to terminate a student from his/her internship placement at any time.

Examples of situations that might result in termination include:

- a) failure to comply with agency policies, rules, or regulations,
- b) concerns for consumer or staff safety or health, and/or
- c) work which is not in full accord with the agency's standards of performance.

If the agency does terminate the student at any point during the semester the student will have to wait until the next semester to be placed at a new site and complete the internship. The hours completed at the site that terminated the student will not be carried over.

Attendance

Work Schedule

The student's work schedule during the internship semester is 30 hours per week for 15 weeks. The student's permanent weekly schedule (specific hours and days) is to be arranged between the agency and the student and developed to accommodate agency needs as well as the student's class schedule. An example of a work week may be that the student works three days full-time and two days half-time, or four full days.

Vacation and Holidays

All students are obligated to fulfill the 450 hour requirement to complete the internship. The internship begins the first day of the semester and must be completed by the Friday before finals week that semester. Once students begin their internships, they are to abide by that agency's calendar with respect to work hours and holidays. Requests for absences due to breaks or vacations that the student foresees within the semester of the internship must be arranged with the agency prior to the start of the internship, if possible. In other words, students must work according to the agency schedule rather than the SIUC schedule unless other arrangements are made with the agency. If the agency is closed in observance of a holiday, the student will get credit for that day according to the hours on his/her permanent schedule.

Illness and Emergencies

In the event of illness or some other legitimate reason for missing work, students are responsible for notifying the agency and the Internship Coordinator of their

absence, as well as arranging to make up missed hours. Additionally if any student is injured while on their internship site the student should notify their supervisor and the Internship Coordinator immediately. Any hours that the student is unable to work during the week must be made up to meet the 450hour requirement for the semester. The total number of hours a student may work per week to make-up missed time is limited to 40 hours/week unless prior arrangements are made with the Internship Coordinator.

Transportation

Students using their personal vehicle to travel to their prospective agencies are liable in the event they are involved in a traffic accident. Neither the Rehabilitation Institute nor the agency will in any way be responsible for any damages that occur to the student's vehicles. Students are advised to contact their insurance carrier for further instructions. Students are not permitted to transport clients using their personal vehicles while working at their internship site; however, students are permitted to perform errands for their supervisor while at the agency.

Rehabilitation Institute and Student Responsibilities

Responsibilities of the Rehabilitation Institute

It is the responsibility of the Rehabilitation Institute and SIUC Internship Coordinator to:

1. Select agencies participating in the internship process that will meet the requirements for an internship site, and determine agency willingness to cooperate with the school in provision of an educationally sound and professionally focused internship experience;
2. Develop an Educational Affiliation Agreement or a Memorandum of Understanding between the agency, the Rehabilitation Institute and the College of Education and Human Services;
3. Determine the criteria for selection and assignment of students to internship sites;
4. Assist students in developing appropriate goals and objectives for their internships;
5. Maintain good working relationships between internship agencies and the Rehabilitation Institute;
6. Conduct evaluations of the students' performance during the internship placement;
7. Provide ongoing advisement to the students and any needed consultation to agencies in which students are placed;
8. Be available for consultation with agency directors, supervisors, and students on a regular basis and as needed;
9. Assume responsibility for the termination process of any student from the internship placement;
10. Assign each student a grade for the internship.

Responsibilities of the Student

Students have a major role in the internship process and are expected to be active participants at all times. They must:

1. Complete all paperwork relating to the internship process in a timely and professional manner;
2. Participate in the development of goals and objectives for their individual internship experience;
3. Attend all mandatory meetings throughout the semester;
4. Assume a role as a professional member of the internship agency's staff and adhere to the agency's policies, regulations, and procedures (including but not limited to confidentiality);
5. Initiate action to resolve any conflict within the internship setting. It is only after the student has attempted to resolve matters on his/her own that the SIUC Coordinator will become involved;
6. Act in a professional and ethical manner as a representative of the agency (and SIUC) regarding any contact with consumers, colleagues, and the community;
7. Meet the 450 hour internship requirement.
8. Adhere to the permanent weekly work schedule unless otherwise arranged.

Appendices

Appendix A: Internship Checklist

*As you complete the internship, check off each item. To complete the internship, you must have the internship coordinator's (IC) initials and date indicating that you did indeed complete the step. **Failure to do so may result in a failing grade.***

Prior to the semester in which you complete your internship:

Step 1: Meet with Undergraduate Advisor to ensure you meet the internship requirements

Completed IC initials _____

Step 2: Attend Mandatory Group Meeting

Completed IC initials _____

Step 3: Schedule individual meeting with internship coordinator

Completed IC initials _____

Step 4: Complete Student Résumé Worksheet, review internship manual, and identify 3 or more possible internship sites PRIOR to attending individual meeting with internship coordinator

Resume Completed IC initials _____

Reviewed Manual Completed IC initials _____

Sites Completed IC initials _____

Step 5: Attend individual meeting with internship coordinator

Completed IC initials _____

Step 6: Develop individualized internship objectives to take to interviews

Completed IC initials _____

Step 7: Contact sites to set up interviews. This step can only be completed AFTER receiving contact information for the sites from the internship coordinator.

Completed IC initials _____

Step 8: Go on interviews

Completed IC initials _____

Step 9: Review individualized objectives with each site interviewer, review site policy on background checks or any other necessary paperwork required by the agency

Objectives Completed IC initials _____

Necessary Paperwork Completed IC initials _____

Step 10: Choose final site

Completed IC initials _____

Step 11: Meet with internship coordinator to discuss selected site and discuss paper work that will be necessary for internship

Completed IC initials _____

Step 12: Obtain all necessary background checks and complete all paperwork PRIOR to the first week of the internship semester

Completed IC initials _____

Step 13: Make final arrangements with site as to official start date (i.e., when do you begin accruing hours?)

Completed IC initials _____

Students should bring this checklist to all meetings that occur PRIOR TO the internship semester. Upon completion of all the steps, the internship coordinator will make a copy of this checklist to be kept in student records. However, students should keep the original on file until they have received their final grade for the internship.

During the Internship Semester

Step 1: Attend the internship on the official start date

Completed IC initials _____

Step 2: Meet with the internship coordinator during the FIRST WEEK of the semester (regardless of your start date)

Completed IC initials _____

Step 3: Send internship coordinator permanent schedule, with first week's paper work, by the second Friday of the semester.

Completed IC initials _____

Step 4: Send internship final individualized objectives, with supervisor approval (as indicated by supervisors signature) by the third Friday of the semester.

Completed IC initials _____

Step 5: Set up date for mid-term evaluations NO LATER than the fifth Friday of the semester

Completed IC initials _____

Step 6: Attend mid-term evaluation

Completed IC initials _____

Step 7: Set up date for final evaluation AT midterm evaluation

Completed IC initials _____

Step 8: Attend final evaluation

Completed IC initials _____

Step 9: Complete final paperwork AT final evaluation

Completed IC initials _____

Students should bring this checklist to all meetings that occur DURING the internship semester. Upon completion of all the steps, the internship coordinator will make a copy of this checklist to be kept in student records. However, students should keep the original on file until they have received their final grade for the internship.

Appendix B: Student Résumé Worksheet

I. Personal Data

Name: _____

Date of Birth: _____

Address: _____

Phone: _____

Email: _____

Permanent Address: _____

Expected Date of Graduation: _____

Driver's License Number: _____

Do you have access to a vehicle? _____

II. Education

College or University: _____

Dates of Attendance: _____

Major: _____ Degree: _____

College or University: _____

Dates of Attendance: _____

Major: _____ Degree: _____

High School: _____

Graduation Date: _____

III. Work Experience: (Previous employment, starting with the MOST recent)

1. Employer: _____
_____ Address: _____
_____ Supervisor's name/ phone: _____
_____ Job title and employment dates: _____
_____ Job duties: _____

2. Employer: _____
_____ Address: _____
_____ Supervisor's name/ phone: _____
_____ Job title and employment dates: _____
_____ Job duties: _____

3. Employer: _____
_____ Address: _____
_____ Supervisor's name/ phone: _____
_____ Job title and employment dates: _____
_____ Job duties: _____

IV. Other experience or volunteer activities related to rehabilitation (include agency name, dates, and duties or tasks).

1. _____

2. _____

3. _____

V. References: Please list three (including one SIUC Rehab faculty member). Please include: name, address, title, email and phone.

1. _____

2. _____

3. _____

VI. Please list any courses that you have taken that you feel are relevant to this internship experience.

Sample Resume

Student Name

Local Address:

312 W. United
Carbondale, IL 62901
(618) 123-4567
myemail@siu.edu

Permanent Address

PO Box 1234
Washington, MO 12345
(314) 123-4567

Objective A Bachelor's level internship position working with people with disabilities

Education

Bachelor of Science

Prospective graduation date: May 2009
Southern Illinois University at Carbondale
Major: Rehabilitation Services

Related Course Work

Introduction to Behavior Analysis
Vocational Placement & Development
Basic Practices in Rehabilitation
Introduction to Alcoholism & Drug Abuse
Introduction to Aging & Rehabilitation
Behavior Change Applications

Introduction to Rehabilitation
Introduction to Staff Supervision
Emotionally Disturbed
Community-based Employment
Developmental Disabilities
Disability, Diversity & Society

Work Experience

Life skills therapist - 2005 to present
Center for Comprehensive Services, Carbondale, Illinois
Duties include: Assisting, supervising, and training individuals with traumatic brain injury in basic and advanced living skills, facilitate leisure planning with participants, assist with the fulfillment of program guidelines developed by the multi-disciplinary team.

Volunteer Experience

AIDS Walk 2007, walked and assisted with registration

Professional Memberships

STARS (Students Together Advocating Rehabilitation Services) member
NRA (National Rehabilitation Association) member

References available upon request

Appendix C: Individualized Student Objectives

Individualized Student Objectives (completed by Student and Internship Coordinator in week 2-4)

- 1.
- 2.
- 3.
- 4.
- 5.

Comments: _____

Signature

Student/Date

Appendix D: Student Internship Permanent Schedule

Please use the following form to outline the **permanent schedule** that you have arranged with your internship site. Please include this form along with your first set of activity sheets to the Internship Coordinator. If for some reason there is a permanent change to this weekly schedule, please contact the Internship Coordinator regarding these changes.

Name: _____ Site: _____

| Time | Monday | Tuesday | Wednesday | Thursday | Friday |
|---------|--------|---------|-----------|----------|--------|
| 7-8am | | | | | |
| 8-9 | | | | | |
| 9-10 | | | | | |
| 10-11 | | | | | |
| 11-12pm | | | | | |
| 12-1 | | | | | |
| 1-2 | | | | | |
| 2-3 | | | | | |
| 3-4 | | | | | |
| 4-5 | | | | | |
| 5-6 | | | | | |
| 6-7 | | | | | |
| TOTAL | | | | | |

Appendix E: Student Internship Weekly Time Sheet

This form is completed, signed by student and supervisor, and submitted weekly to Internship Coordinator.

Name _____ Site: _____

Week# _____ Dates _____

(Start time - Stop time) and (Total hours minus lunch break)

Mon: _____

Tues: _____

Wed: _____

Thurs: _____

Fri: _____

Sat/Sun: _____

Total for Week: _____ Total for Semester: _____

Activities/Accomplishments:

Student signature _____ Date _____

Agency Supervisor signature _____ Date _____

Mail to: R.S. Internship Coordinator
 SIUC Rehabilitation Institute
 Mailcode 4609
 Carbondale, IL 62901-4609

Fax to: 618-453-8271

Appendix F: Student Internship Weekly Feedback Sheet

The purpose of this form is to provide you with the opportunity to evaluate your internship experience on a weekly basis. This form is to be returned to the Internship Coordinator along with your weekly time sheet. Please circle the best response for the following questions. For any area(s) that you are dissatisfied or disagree please provide an explanation.

Name: _____ Week #: _____

1. I feel as though the level of supervision I am receiving is appropriate.

Strongly Agree Agree Disagree

If disagree, explain why. _____

2. I feel as though the variety of tasks I am being assigned is appropriate.

Strongly Agree Agree Disagree

If disagree, explain why. _____

3. I feel as though the level of responsibility that I am given at my internship site is appropriate.

Strongly Agree Agree Disagree

If disagree, explain why. _____

4. I feel that the duties I am asked to do are appropriate for a bachelor's level experience.

Strongly Agree Agree Disagree

If disagree, explain why. _____

Appendix G: Student Internship Evaluation Form

(Completed by Agency Supervisor)

This evaluation form provides several categories designed to assist you in evaluating the progress of the student intern at your site. This form will be used for both the midterm as well as final evaluation. As a result, it is understood that certain criteria will be more clearly exhibited as the semester progresses. You will see that some of the scoring has been shaded to show that these areas are either met or unmet with no real expectation that a student could exceed in that area. Please complete this form **prior** to the meeting with the SIU Internship Coordinator so that you may identify any areas that are worthy of discussion.

How to use form:

In the boxes following the statements below please mark whether the student is below expectations, meets expectations, exceeds expectations, or the behavior is not observed. If a student falls below expectations, please provide a comment. Comments for other areas are welcome and encouraged.

Examples:

Below: If an employee behaved in this manner, you would take action to remedy the situation

Meets: You would be satisfied with that person's behavior if s/he were an employee

Exceeds: This is behavior that you would like to reward in some manner (e.g., memo, merit raise etc.) if s/he were your employee.

I. Personal Qualities

In the boxes following the statements below, please mark whether the student is performing below expectations, meets expectations, exceeds expectations, or the behavior is not observed. If a student falls below expectations, please provide a comment. Comments for other areas are welcome and encouraged.

| Please rate student's performance: | Below | Meets | Exceeds | Not Observed | Comments |
|--|-------|-------|---------|--------------|----------|
| Is punctual for appointments | | | | | |
| Keeps appointments or cancels when necessary | | | | | |
| Respects confidentiality | | | | | |
| Uses acceptable language and displays appropriate behavior for environment | | | | | |
| Maintains personal appearance appropriate for setting | | | | | |

II. Interpersonal Skills

In the boxes following the statements below, please mark whether the student is below expectations, meets expectations, exceeds expectations, or the behavior is not observed. If a student falls below expectations, please provide a comment. Comments for other areas are welcome and encouraged.

| Please rate student's performance: | Below | Meets | Exceeds | Not Observed | Comments |
|--|-------|-------|---------|--------------|----------|
| Accepts, empathizes, shows concerns for the consumer as a person | | | | | |
| Understands consumer problems, needs, and stressors | | | | | |
| Demonstrates verbal and non-verbal communication skills with consumers | | | | | |
| Conveys to consumer in a non-threatening manner the standards of behavior and expectations for performance | | | | | |
| Listens, asks questions, participates in consumer related discussions | | | | | |
| Requests assistance from supervisor or other staff when appropriate | | | | | |

II. Interpersonal Skills cont'd

| Please rate student's performance: | Below | Meets | Exceeds | Not Observed | Comments |
|---|-------|-------|---------|--------------|----------|
| Creates an atmosphere based on honesty and trust with the consumer and family | | | | | |
| Communicates with other staff in a professional manner | | | | | |

III. Professional Knowledge / Skills

In the boxes following the statements below, please mark whether the student is below expectations, meets expectations, exceeds expectations, or the behavior is not observed. If a student falls below expectations, please provide a comment. Comments for other areas are welcome and encouraged.

| Please rate student's performance: | Below | Meets | Exceeds | Not Observed | Comments |
|---|-------|-------|---------|--------------|----------|
| Distinguishes role of bachelor level provider from master's trained clinician and stays within boundaries of training | | | | | |
| Meets deadlines for paperwork | | | | | |
| Understands medical and psychosocial aspects of disability relative to the population served by the Agency | | | | | |
| Understands and supports the purpose of the Agency | | | | | |

III. Professional Knowledge / Skills cont'd

| Please rate student's performance: | Below | Meets | Exceeds | Not Observed | Comments |
|---|--------------|--------------|----------------|---------------------|-----------------|
| Adheres to Agency policies and procedures | | | | | |
| Is knowledgeable of various programs/services offered by the Agency | | | | | |
| Is aware of other programs/services offered in the community that may be utilized by consumers served at the Agency | | | | | |
| Completes written documentation in an organized, concise, and clear manner | | | | | |
| Understands treatment plans and the development of consumer objectives/goals | | | | | |
| Integrates report and/or evaluation information into service delivery | | | | | |
| Monitors consumer progress and maintains accurate records | | | | | |
| Performs in accordance with ethical and legal standards | | | | | |

Signatures

Student/Date

SIUC Internship Coordinator/Date

Agency Supervisor/Date

Appendix H: Internship Sites

Agency

ADAPT of Illinois

430 S. Front St.
Cobden, IL 62920

Programs we have worked with

Geropsychiatric rehabilitation.
Provides specialized services to elderly people with serious and persistent mental illness.

Alzheimer's Association

320 E. Walnut St. Suite A
Carbondale, IL 62901

Provide services to individuals and families dealing with Alzheimer's and its effects.

Big Muddy River Apartments

5 N. Shawnee Drive
Murphysboro, IL 62966

Assisted/independent living services for aging adults

Brehm Options

101 S. Lewis Lane
Carbondale, IL 62901

Serves adolescents with learning disabilities and behavioral problems.

Century Assisted Living

701 S. Lewis Lane
Carbondale, IL 62901

Assisted living for older adults.

Child and Family Connections

2751 West Main
P.O. Box 1180
Carbondale IL 62901

Early intervention services for families with children with developmental disabilities.

Choate Mental Health & Developmental Center

1000 N. Main St.
Anna, IL 62906

Assist in providing psychiatric services for individuals with mental illnesses and developmental disabilities.

Coleman Tri-County
22 Veterans Dr.
Harrisburg, IL 62946

Providing services to individuals with developmental disabilities

Community Health & Emergency Services
13245 Kesler Rd. Box 11
Cairo, IL 62914

Assist in providing services to adolescents dealing with substance abuse.

Delta Center
1400 Commercial Ave.
Cairo, IL 62914

Assist in providing behavioral health services.

Egyptian Mental Health Department
1412 US 45 North
Eldorado, IL 62930

HIV education, substance abuse, mental health, and rehabilitation

Evaluation and Developmental Center
Mail Code 6704
500 Lewis Lane
Carbondale, IL 62901-6704

Independent living skills training for young adults with developmental disabilities. vocational training.

Family Counseling Center
408 Vine St.
Vienna, IL 62995

Various programs serving people in need of mental health services.

Fellowship House
P.O. Box 682
Anna, IL 62906

Substance abuse services.

Five Star Industries
P.O. Box 60
DuQuoin, IL 62832

Vocational development for individuals with developmental disabilities.

| | |
|---|---|
| <p>Franklin-Williamson Human Services Rehabilitation Center 902 W. Main St. West Frankfort, IL 62896</p> | <p>A comprehensive community mental health center.</p> |
| <p>Friendship Care center 1900 N. Park Ave Herrin, IL 62948</p> | <p>Skilled nursing facility. Case management, person centered planning.</p> |
| <p>Gateway Foundation 1080 E. Park St. Carbondale, IL 62901</p> | <p>Provide substance abuse treatment to adolescents</p> |
| <p>Gold Plate Program of Perry County 721 N. Hickory Du Quoin, IL 62832</p> | <p>Provides services for seniors and people with developmental disabilities</p> |
| <p>Good Samaritan House 701 S. Marion Street Carbondale, IL 62901</p> | <p>Provides services to individuals with drug and alcohol addictions</p> |
| <p>H-Group 3111 Williamson County Pkwy P.O. Box 365 Marion, IL 62959</p> | <p>Provides mental health and substance abuse services to adults.</p> |
| <p>Herrin Hospital Acute Rehabilitation Center 201 South 14th St Herrin, IL 62948</p> | <p>Acute rehabilitation for neurological and orthopedic injuries</p> |
| <p>Human Service Center 10257 State Route 3 Red Bud, IL 62278</p> | <p>Provides a wide range of services to individuals with mental illness and developmental disabilities.</p> |

| | |
|--|---|
| <p>Illinois Veteran's Home 792 North Main Street Anna, IL 62906-1627</p> | <p>Provides a home for Illinois veterans who are unable to care for themselves. Attempts to identify and meet social and emotional needs of veterans.</p> |
| <p>Illinois Youth Center – Harrisburg 1201 W. Poplar P.O. Box 300 Harrisburg, IL 62946</p> | <p>Drug education and counseling for youth offenders.</p> |
| <p>Illinois Youth Center- Murphysboro 636 Elza Brantley Dr. P.O. Box 1507 Murphysboro, IL 62966</p> | <p>Drug education and counseling for youth offenders.</p> |
| <p>Jefferson County Comprehensive Services P.O. Box 428 Mt. Vernon, IL 62864 disabilities.</p> | <p>Provides services for individuals with developmental</p> |
| <p>J. R.'s Centre P.O. Box 181 Anna, IL 62901</p> | <p>Provides a vocational program for individuals with developmental disabilities.</p> |
| <p>Lutheran Social Services 1616 W. Main Marion, IL 62959</p> | <p>Works with abused children and supervises family visits.</p> |
| <p>MAP Training Center 504 E. 7thSt. Karnak, IL 62956</p> | <p>Developmental disabilities, vocational program.</p> |
| <p>Menard Correctional Center 711 Kaskaskia Street Menard, IL 62259</p> | <p>Assessment, drug education self-help programs, substance programs for adult offenders.</p> |

Nero Restorative

752 W. Mill
 P.O. Box 2825
 Carbondale, IL 62902

Services for people with TBI.

Oak Terrace

4219 Lincolnshie Dr.
 Mt.Vernon, IL 62864

Residential program for
 adults with develop-
 mental disabilities.

Our Directions

800 E. Herrin St.
 Herrin, IL 62948

Day workshop for
 senior citizens with
 disabilities.

Psychiatric Institute of Southeastern IL

100 Drive Warren Tuttle Dr.
 P.O. Box 428
 Harrisburg, IL 62946

Adult inpatient psychiatric unit

River To River Residential Communities

Hurricane Creek Apartments
 400 Lou Ann Dr.
 Herrin, IL
 618-988-9540

Senior assisted living and
 supportive residential living

Cache Valley Apartments

751 Ullin Ave.
 Ullin, IL.
 618-845-9065

Big Muddy Apartments

Big Muddy West Apartments
 5 N Shawnee Drive
 Murphysboro, IL
 618-684-5818

River to River Community of Marion
 1515 E.DeYoung St.
 Marion, IL.
 6180993-3505

River to River Community of Anna
 151 Denny Drive
 Anna, IL. 618-833-5495

Riverview Terrace
 201 Spring St.
 Rosiclare, IL 62982

Provide services to individuals
 with developmental disabilities.

Senior Adult Services
 409 North Springer Street
 Carbondale IL 62901

Provides services to older adults

Shawnee Alliance for Seniors
 6355 Brandhorst Drive
 Carterville, IL 62918

Attempts to enable older adults
 to live at home as long as
 possible by providing case
 management and other services.

SIBS (Southern Illinois Behavioral Services)

1110 Cedar Court
 Carbondale, IL 62901

Provides outpatient psychiatric
 services.

SICIL (Southern Illinois Center for Independent Living)

2135 W. Ramada Ln
 P.O. Box 627
 Carbondale, IL 62901

Advocacy, information,
 referral, and supported
 employment.

SIRSS

604 E. College
 Carbondale, IL 62901

A community mental
 health center. Includes: Adult
 residential program,
 psycho-social rehab, and
 residential services.

START

P.O. Box 938
20 N. 13th St.
Murphysboro, IL 62966

Provides comprehensive rehabilitation services to people with developmental disabilities.

St. Mary's Hospital

400 N Pleasant
Centralia, IL 62801

Case management and discharge planning for individuals with mental illness.

TASC

810 Locust St.
Murphysboro, IL 62966

Substance abuse services.

TRADE Industries

RR. 5 P.O. Box 70
McLeansboro, IL 62859

Vocational rehabilitation services for people with developmental disabilities.

Trinity Services Inc.

Corporate Center or
Employee Services
301 Veterans Parkway
New Lenox, IL
815-485-6197

Union County Counseling

204 South St.
Box 548
Anna, IL 62901

Psychosocial Rehab for people with psychiatric disorders.

United Methodist Children's Home

2023 Richview Road
Mt. Vernon, IL 62864

Community based services for children and families: including prevention, intervention, and reunification.

Washington County Voc.

477 E. Maple St.

Assist with case management

Nashville, IL 62263

Warren G.

Murray Developmental Center

1535 W McCord

Centralia, IL 62801

Assist individuals with
developmental disabilities.

Wellness Center at SIU

215 Kesner Hall

Carbondale IL 62901

Provide services and education
regarding: HIV/AIDS, eating
disorders, and alcohol & drug
education.

Appendix I: Confirmation of Internship Placement and Required Paperwork

I _____ confirm that _____ has been accepted as an undergraduate intern for the _____ semester and has completed all the necessary paperwork, background checks, blood work, and any additional tests required by _____ which is the facility where the intern will be completing their undergraduate internship.

By signing this form I am confirming that _____ has completed all the necessary paperwork and is ready to begin their undergraduate internship at _____ for the _____ semester.

Signature and Date:

Agency Supervisor

Date

Student

Date

Appendix J: Rehabilitation Services Graduating Information

Rehabilitation Services Graduating Student Information Sheet

Semester Graduated

Name: _____

Dawg Tag: _____

Current Address: _____

Current Phone: _____

Current e-mail: _____

Do you plan to leave Carbondale *immediately* after graduation? __Yes __

No

If yes, please provide an address, phone number and email address where you can be reached.

Forwarding Address:

Future Phone: _____

Future e-mail: _____

If you are not leaving immediately, what are your plans? _____

What will your address, etc. be during this time?

Temporary Address: _____

Temporary Phone: _____

Temporary e-mail: _____

Please provide a *permanent address* etc., where we will be able to reach you and/or send information to you (e.g., parents address):

Permanent Address: _____

Permanent Phone: _____

Permanent e-mail: _____

Have you obtained employment after graduation? If yes, please list your employer, job title, and address of your new employer. _____

Do you have plans on continuing your education? If yes, please list the institution, degree and when you plan to begin this degree. _____

Appendix K: Student Evaluation of Internship Experience

Student Name: _____
 Internship Site: _____
 Direct Supervisor: _____
 Department/Area: _____

Please answer the following questions regarding your internship experience. Circle the one the best describes your overall experience with your agency this semester.

1. My supervisor maintained an attitude of encouragement and showed interest in my progress.

| | | | | |
|----------------|-------|----------|-------------------|----------------|
| A | B | C | D | E |
| Strongly Agree | Agree | Disagree | Strongly Disagree | Not Applicable |

2. My supervisor made him/herself available when needed.

| | | | | |
|----------------|-------|----------|-------------------|----------------|
| A | B | C | D | E |
| Strongly Agree | Agree | Disagree | Strongly Disagree | Not Applicable |

3. My supervisor was willing to help me if professional problems developed during my internship experience.

| | | | | |
|----------------|-------|----------|-------------------|----------------|
| A | B | C | D | E |
| Strongly Agree | Agree | Disagree | Strongly Disagree | Not Applicable |

Please answer the following questions as openly and honest as possible. There are no right or wrong answers. These questions are simply to help us make internships in the

future as positive an experience as possible. This form is for internal use only and will not be seen by any of the internship sites.

What did you like **most** about your internship experience?

What did you like **least** about your internship experience? _____

Would you recommend using this site again? Yes _____ No _____
If no, why not?

What suggestions (if any) do you have to make it a better internship experience if another student should go there?

Do you feel as though the agency you were placed at provided "best practice" regarding rehabilitation? (e.g., Did they follow similar procedures and practices in everyday work that you learned in classes?)
Yes _____ No _____

Do you feel that the amount of contact throughout the semester from the internship coordinator was enough? Yes _____ No _____

If no, why not?

Would you have liked a mid-term meeting with all of the internship students?

Yes _____ No _____

Other comments:

Notes