



WINONA

STATE UNIVERSITY
CLINICAL EXERCISE SCIENCE

Winona State University
College of Nursing & Health Sciences
Department of Health, Exercise & Rehabilitative Sciences

Clinical Exercise Science Internship Handbook

Internship Introduction & Purpose

Internships provide students the opportunity to cultivate career interests and refine skills in professional settings. This handbook provides an overview of the internship protocol requisite for Clinical Exercise Science students at Winona State University.

The Health, Exercise and Rehabilitative Sciences (HERS) Internship Program offers invaluable experiential learning opportunities essential for students' professional development. Field experience provides a means of reinforcing and enhancing academic preparation, as interns actively employ their knowledge and skills within real work environments. Through cooperative planning and implementation in a partnership with the internship agency (site), the Department mandates the completion of internships for eligible degree candidates.

HERS 497

Clinical Exercise Science

8-12 Credits

This handbook has been designed to assist Clinical Exercise Science majors in navigating the procedural intricacies necessary for the successful acquisition and completion of the “capstone” Internship experience.

The Internship experience serves as a practical transition for students from the classroom to workplace settings. Within the structured framework of a university-approved agency/site and under the direct supervision of a university-approved professional in the field, the students receive guidance in navigating the shift from academic studies to assuming the responsibilities of an employee in a real-world worksite.

Internship Overview

Internship Objectives

The capstone internship experience affords student interns opportunities to:

- Participate in productive work activities as cooperative, contributing team members.
- Actively apply previously acquired knowledge and technological skills to meeting site/agency job requirements and expectations.
- Demonstrate interpersonal relations and communication skills as applied to on-the-job oral and written communications.
- Exercise decision-making and problem-solving abilities in performing self-directed work assignments.
- Evaluate current expertise and academic achievements in relation to agency/site needs and performance standards.
- Assess career plans and aspirations in relation to field experience.
- Must have complete hands-on experience and apply your prior knowledge.

Internship Eligibility

- Major GPA ≥ 2.8
- Cumulative GPA ≥ 2.8
- Grades of “C” or better in all major courses
- Completion of all major coursework
- Senior standing
- Current CPR, First Aid, and AED certifications
- Current Immunization as deemed by the site (including, but not limited to: Tetanus shot, TB test, Flu vaccine,...)
- Liability insurance

HERS Department Contacts

Dr. Justin Geijer Professor, Department Chair Telephone: 507.457.5205 Email: JGeijer@winona.edu Fax: 507.457.2554	Kris Stevens Administrative Assistant Telephone: 507.457.2600 Email: KStevens@winona.edu Fax: 507.457.2554
Dr. Teresa Eber Lee Program Director/Internship Advisor: Clinical Exercise Science Professor Telephone: 507.457.2271 Email: Telee@winona.edu Fax: 507.457.2554	

Internship Requirements

Credits/Hours

- All internships are taken on a pass/no credit (P/NC) basis.
- All internships are 8-12 credits. The number of credits a student registers for is based on their academic needs and timing of the internship. To be considered a full-time student during the fall/spring semesters, students must register for 12 credits. To be considered a full-time student during the summer, students must register for 8 credits. Students also need 120 credits overall to graduate, thus, the number of credits taken will depend on each students' needs. It is best to talk to the internship advisor regarding how many credits to take.
- Generally, one semester (15 weeks) is set aside to complete the internship with a total of 600 hours required.
- Students must work a minimum of 20 hours/week and no more than 50 hours/ week. Fewer than 40 hours in any one week will necessitate additional weeks at the internship site. A student may not decrease the required consecutive internship weeks by consistently working more than 40 hours/week. Conversely, students working less than 40 hours/week must complete all internship requirements within 20 weeks, unless prior approval has been granted by the Faculty Internship Advisor.

- Students must begin and complete at least ½ of the required hours during the semester in which registered.
- Students may enroll in a maximum of 18 credit hours/semester; however, the internship is a full-time commitment, and this is strongly discouraged.
- Students in the HERS Department may complete only one internship per semester.

Registration

Upon the completion of all requisite documentation (listed below) by the student intern and receipt of confirmation from the internship site, along with the establishment of a fully executed Memorandum of Agreement, the student intern will be enrolled by the HERS Administrative Assistant or Program Advisor. It is the student's responsibility to ensure enrollment is for the correct course, number of credits, and semester.

Necessary Documentation for Registration

*All forms and further explanation of each form is in the appendix.

1. Important Notices form
2. Confidentiality Agreement form
3. A MN background study clearance letter through WSU's College of Nursing and Health Sciences
4. Current certificates for Adult First Aid, CPR, and AED
5. Current Mantoux (tuberculin skin 'TB') test results (these are required annually)
6. Immunization records from a healthcare provider
 - a. Note: Students who have not been vaccinated and do not want to be vaccinated should provide a signed waiver. An immunization waiver form can be acquired from the WSU Health Service Department located in the Integrated Wellness Center. Students who have not been vaccinated are responsible for asking the internship site if they will admit the student without vaccination. It is the student's responsibility, not the University's to find an internship site that will accept them without vaccination
7. Proof of medical/health insurance
8. Memorandum of Agreement

Memorandum of Agreement (MOA)

After meeting with the appropriate Faculty Internship Advisor and at least 12 weeks minimum, prior to the start of the internship, the student intern must submit completed Intent to Internship form to the HERS Administrative Assistant. Upon reception, the HERS Administrative Assistant will promptly dispatch a Memorandum of Agreement and accompanying cover letter to potential internship sites if Agreement is not already in place.

Student Professional Liability Insurance

All WSU students that are enrolled in internships and/ practicum must purchase professional liability insurance. It is an industry standard that any individual involved with the wellbeing of another must carry malpractice insurance. Therefore, Minnesota State Colleges and Universities (MnSCU) provides a blanket liability insurance policy with American Casualty Company (\$2 million per occurrence; \$5 million aggregate) at cost of \$13.00 per academic year. This will be billed to your student account automatically upon registration for any such course.

Internship Steps

These are the suggested steps to follow as you prepare for your internship. It is expected that internships are found, solidified, and students fully registered by Registration Week in the semester before you intern.

STEP 1

1. **Read the internship handbook.**
2. **Attend the internship meeting – all students will be exposed to internship guidelines at two points**
 - HERS 420: Clinical Exercise Testing and Prescription
 - HERS 385: Clinical Exercise Science Senior Seminar
3. **Determine what type of setting you are looking to work in**
 - Hospital, clinic, rehabilitation, diagnostic testing
4. **Determine your finances and housing arrangements, consider the following questions:**
 - Can you afford to intern outside of Winona? If yes, what locations are in your budget?
 - If your internship is unpaid, do you need to work while you intern?
 - Do you have someone to take over your lease? How much would it cost to break your current lease?
 - Do you have any connections (family, friends, etc.) for living arrangements outside of Winona?
 - Are there specific cities/states you would like to live/commute to? If yes, can you afford transportation to the city/state and housing for ~15 weeks?
 - Do you have a significant other, pet, person, or family member you do not want to move away from?

STEP 2

5. **Start looking for your internship sites within the city and scope of what you want to do**
 - Look through the Current Internship Documentation, student portal, google searches, online groups, etc.
 - Contact connections you may have at a certain business, facility, or school
 - Research specific internship sites
 - Determine the application process, due dates, etc.
6. **Update your resume and cover letter**
 - Emphasize the following

- You are a Winona State University student seeking a Clinical Exercise Science internship
- The internship must be 600 hours of a meaningful experience
- The internship must be supervised
- The estimated dates you are looking for an internship
- The Warrior Success Center (MA 314) is also available for help in
 - Resumes, cover letters, mock interviews

STEP 3

7. Narrow down to your top 3-5 sites and start contacting them!!!

- Ask about application procedures and deadlines
- Ask about specific certifications needed
- Call or email them and include your cover letter and resume

8. Apply for graduation – check WSU website for complete details

STEP 4

9. Meet with your academic advisor.

- Bring the following completed forms:
 - Intent to Intern
 - Important Notices
 - Make sure your TB test, Tetanus shot, and First Aid, CPR, & AED are all current.
- This will start the Memorandum of Agreement (MOA) process, which needs at least 12 weeks for our Legal Department to process. If this step is delayed, your internship start date may be delayed or you may need to choose a different site.
 - So Clinical sites may require additional vaccines, testing, and certifications.
- Faculty Advisor will review all documentation
 - If documentation is missing, the student must submit missing/expired/expiring documentation
 - If all documentation is completed, the student must wait for the MOA to be approved before enrollment
- The HERS AA will start the MOA process.
 - Once the MOA is approved, the HERS AA will enroll you for the course

- If the MOA is not approved or significantly delayed, discuss other internship options with your faculty advisor.
- For the protection of our students, the WSU Legal Affairs Department must review the language in all affiliation agreements. This can often slow the process by three or more months. There have been incidents in the past where contract language has resulted in unsuccessful contract negotiation, forcing the student to search for another internship site. If you have an internship site in mind that does not yet have a contract with Winona State University, you **MUST** be prepared with everything at the beginning of the semester prior to your internship, or even the semester before.
- The student should stay in contact with the HERS AA and faculty advisor regularly based on the status of your progress toward enrollment

10. Enrollment into HERS 497: Internship in Clinical Exercise Science

- The HERS AA will enroll you into HERS 497 once all documentation is completed and the MOA is approved. ***Students may not start hours under any circumstances until enrolled in the course.***

Responsibilities of Individuals

Student Responsibilities

- Successfully complete the total work hours and job requirements as agreed upon with the on-site internship supervisor/site/agency and the Faculty Internship Advisor.
- Complete assignments and submit by due dates/times.
 - Note: In order to receive a final grade, all assignments (detailed in the syllabus) must be satisfactorily completed and submitted to the HERS Faculty Internship Advisor within two weeks of completion of internship.
 - Students will complete the Final Site Evaluation and submit to D2L

HERS Faculty Internship Advisor's Responsibilities

- Meet with student interns.
- Approve eligibility of student.
- Approve internship site, supervisor and duties/responsibilities, and Intent to Internship form.
- Review assignments.
- Receive and review midpoint and final evaluations.
- Ensure that Intern Evaluation Forms (midpoint and final) are completed by the on-site supervisor and reviewed with student intern.

HERS Administrative Assistant's Responsibilities

- Keep handbook and forms current on [HERS SharePoint](#) site.
- Receive the Intent to Internship form from the student intern and start file once signed by the faculty.
- Start and track the Memorandum of Agreement process.
- Review and communicate with the student intern regarding completions of the following forms:
 - Important Notices.
 - Reduced Student Activity Fee (if applicable).
 - Other health information
 - Explain MnSCU liability insurance to the student intern.
- Process registration override in order for student to be enrolled in the internship.
- Send midpoint and final evaluations to site and identify Faculty Internship Advisor.
- Maintain student intern's file during internship.
- Route forms to appropriate Faculty Internship Advisor as necessary.

Appendices

Intent to Internship Form

DEPARTMENT OF HEALTH, EXERCISE, & REHABILITATIVE SCIENCES Intent to Internship

Name: _____ Date: _____

Local Address: _____ Phone: _____

Permanent Address: _____

Tech ID# _____ WSU Email: _____

Other Email: _____ Major/Option: _____

Provide DARS Number of Credits Sought: _____ Faculty Internship Advisor: _____

of Credits obtained prior to Internship: _____ ALL HERS Courses Completed: Y / N GPA: _____

Major GPA: _____

***First Choice--Internship Site:** _____

Address: _____

On-Site Supervisor: _____ Title: _____

Email: _____ Phone: _____

Internship Start Date: _____ End Date: _____ **OR** Semester: _____

****Second Choice-- Internship Site:** _____

Address: _____

On-Site Supervisor: _____ Title: _____

Email: _____ Phone: _____

Internship Start Date: _____ End Date: _____ **OR** Semester: _____

*****Third Choice-- Internship Site:** _____

Address: _____

On-Site Supervisor: _____ Title: _____

Email: _____ Phone: _____

Internship Start Date: _____ End Date: _____ **OR** Semester: _____

Student Signature: _____ **Date:** _____

**Faculty Internship
Advisor Signature:** _____ **Date:** _____

Important Notices Form

**STATE OF MINNESOTA
MINNESOTA STATE COLLEGES AND UNIVERSITIES
WINONA STATE UNIVERSITY
HEALTH, EXERCISE & REHABILITATIVE SCIENCES IMPORTANT NOTICES**

REASONABLE ACCOMMODATIONS

There are conditions for which accommodations may be appropriate under the Americans with Disabilities Act. The Health, Exercise & Rehabilitative Sciences Department will make all reasonable accommodations required by law for otherwise qualified individuals. To receive accommodations, you must contact the Office of Disability Services, located in Maxwell 313. The telephone number is 507.457.5878.

RESPONSIBILITY FOR HEALTH CARE COSTS

Any health care costs incurred during the period of time you are a student in the Health, Exercise & Rehabilitation Programs will be your responsibility. Students enrolled in a Winona State University HERS program are required to have proof of health insurance.

WORKERS' COMPENSATION

It is the position of the internship site/facility and the College/University that, as a WSU student intern, you are not an employee of either the site or the College/University for purposes of Workers' Compensation insurance. (However, if you are officially employed by the site, you would follow the site's workers' compensation policy.)

BACKGROUND CHECKS

An integral part of the HERS Program is the experiential education opportunities. To provide this experience, the College/University contracts with organizations outside of the University. State law requires that any person who provides services which involve direct contact with community members or others outside the University have a background study conducted by the State. A site may initiate a background study by asking you to complete a form so that a background check can be conducted. If, as a result of the background study, you are disqualified from direct contact, it is highly unlikely that the site will be able to allow you to participate in its internship program. If you refuse to cooperate in the background check, the facility will refuse to allow you the internship opportunity. The HERS Program does not guarantee an alternative site placement.

DATA PRACTICES ADVISORY AND INFORMED CONSENT

Some facilities also impose certain requirements regarding the health of persons working in their facilities and may require that health information about students in internship programs be made available to them. The College/University may ask you to provide health information which will be used to determine whether you meet an internship site's health requirements for care providers. Health information collected is private data on you. A site may refuse to allow you to participate based on data provided by you. The information provided will be disclosed, as needed, to the Department of HERS and, should any site request the data, to any site where you are placed as a student intern. You are not legally required to provide this information to the HERS Department. However, refusal to provide the information requested could mean that a facility may refuse to accept you at its site. The HERS Department does not guarantee an alternative placement.

I hereby authorize the Department of Health, Exercise & Rehabilitative Sciences to release my health information to any facility to which I am assigned during my HERS education, should the facility request the information. This authorization is valid for one year from the Date of Signature below.

Student's Name (please print): _____

Student's Signature: _____

Date of Signature: _____

MnSCU015

Revised 10/2010



APPLICANT BACKGROUND STUDY

You received this form because you applied for a position that requires a Minnesota Department of Human Services (DHS) background study. Follow the instructions below to submit your background study request to the provider. The provider will review and *may* submit your background study request to DHS. Provider means a facility, program, or agency initiating background study requests under Minnesota Statutes, chapter 245C.

Provider Name and License Number	Provider Number
WINONA STATE UNIV-COLL OF NUR & HEALTH SCIENCE (900085) 900085	9NNN6P

Instructions

- Go to NETStudy 2.0 Applicant Portal**
<https://netstudy2.dhs.state.mn.us/Applicant>
- Create an Account** If you have not created an account before:
 - Click "Register as a new user."
 - Enter your account information. Click "Register."
 - Check your email for the temporary password.
- Login**
Your username is your email address. A temporary password was sent to the email account you used to register. When you login, you will be prompted to change your password and choose a security question.
- Enter Application Information**
 - Click "Create Application" on the home screen
 - Enter 9NNN6P in the provider number field. Click Search. If the correct provider is displayed, click "Continue Application." If an incorrect provider is displayed, contact the provider that gave you this form.
 - Enter your demographic information. Click "Next" after you have completed the required fields on each screen.
 - On the Payment Information screen click "Pay Now." After clicking "Complete Payment" a new tab with the DHS Electronic Payment System will open. Click "Pay without Registering" and complete the payment process.
 - After you have completed payment, return to NETStudy 2.0 and click "Continue." After reviewing the registry screen, click "Finish." Clicking "Finish" will submit your application to the provider.
 - Be careful to enter the information correctly. You will not be able to change it unless you contact the provider.
- Retrieve the Fingerprint and Photo Authorization Form**
After the provider (WSU) finalizes your background study, you will receive an email from IDEMIA/IdentoGO that includes an individual specific tracking number, called a Universal Enrollment Identification (UE ID). The email includes instructions to use IDEMIA's pre-enrollment system and information on locating a fingerprint location.

Frequently Asked Questions

How much does the background study cost?

The background study fee is \$44.00, and the fingerprinting fee is \$9.50.

How can I pay?

The background study fee must be paid using the DHS Electronic Payment System through NETStudy 2.0. You can use a credit or debit card to make the payment. You can setup an account if you plan to use the DHS Electronic Payment System for other background studies or you can bypass the account setup by clicking, "Pay without Registering."

Will I be notified when I can be fingerprinted and photographed?

Yes. After the provider (WSU) finalizes your background study, you will receive an email from IDEMIA/IdentoGO that includes an individual specific tracking number called a Universal Enrollment Identification (UE ID). The email includes instructions to use IDEMIA's pre-enrollment system and information on locating a fingerprint location. You have 14 days to be fingerprinting upon receipt of that email.

What happens next?

The provider will review and verify your background study information. If the provider chooses to submit the background study request, you and the provider will receive a notice of your background study status. The notice will be mailed to you within three days of your fingerprints and photo being taken. The provider will receive the notice electronically.

Where do I find more information?

You can find information on the Background Study website at www.DHS.state.mn.us, select General Public; Office of Inspector General; Background Studies.

What if I have questions?

If you have questions about your background study status call (651) 431-6620. If you have questions about this notice or technical issues registering an account call (651) 431-6625.

BACKGROUND STUDY NOTICE OF PRIVACY PRACTICES

Because the Department of Human Services (DHS) is asking you to provide private information, you have privacy rights under the Minnesota Government Data Practices Act. This law protects your privacy, but also allows DHS to give information about you to others when the law requires it. This notice describes how your private information may be used and disclosed, and how you may access your information.

Why is DHS asking me for my private information?

A background study from the Department of Human Services (DHS) is required for your job or position. The private information is needed to conduct the background study.

How will I be notified that a background study was submitted on me?

DHS will mail you a notice within three working days after a request for a background study is submitted on you. The notice will contain the background study result or let you know that more time is needed to complete the background study. The notice will also identify the entity that submitted the background study request.

What information must I provide to complete the background study?

You are required to provide enough information to ensure an accurate and complete background study. This includes your:

- first, middle, and last name and all names you have ever been known by or used;
- current home address, city, zip code, and state of residence;
- previous home addresses, city, county, and states of residence for the last five years;
- sex and date of birth;
- driver's license or other identification number, and;
- fingerprints and a photograph.

How will the information that I give be used?

The information will be used to perform a background study that will include a check to determine whether you have any criminal records and/or have been found responsible for substantiated maltreatment of a vulnerable adult or child.

Background study data is classified as "private data" and cannot be shared without your consent except as explained in this notice.

What may happen if I provide the information?

You could be disqualified from positions that require a DHS background study if you are found to have committed certain crimes, been determined responsible for maltreatment of a vulnerable adult or child, or have other records that require a disqualification. If you do not have a disqualifying record, you will be cleared to work.

What if I refuse to provide the information?

You will be disqualified if you refuse to provide information to complete an accurate background study. You will not be able to work in a position that requires a DHS background study.

Who will DHS give my information to?

DHS will only share information about you as needed and as allowed or required by law. The identifying information you provide will be shared with the Minnesota Bureau of Criminal Apprehension and in some cases the Federal Bureau of Investigation (FBI). If there is reasonable cause to believe that other agencies may have information related to a disqualification, your identifying information may also be shared with:

- county attorneys, sheriffs, and agencies;
- courts and juvenile courts;
- local police;
- the Office of the Attorney General, and;
- agencies with criminal record information systems in other states.

What information will DHS share with the entity that requested my background study?

The entity that requested the background study will be notified of your background study determination.

If you are disqualified, the entity will not be told the reason unless you were disqualified for refusing to cooperate with the background study or for substantiated maltreatment of a minor or vulnerable adult.

What other entities might DHS share information with?

Information about your Background study may be shared with:

- the Minnesota Department of Health;
- the Minnesota Department of Corrections;
- the Office of the Attorney General, and;
- health-related licensing boards.

What if my disqualification is set aside?

If you request reconsideration of your disqualification and your disqualification is set aside, the entity that requested the background study will be informed of the reason(s) for your disqualification unless the law states otherwise. DHS will provide information about the decision to set aside your disqualification if the entity requests it.

Unless prohibited by law, your name and the reason(s) for your disqualification will become public data if your set aside is for:

- a child care center or a family child care provider licensed under chapter 245A, or;
- an offense identified in section 245C.15, subdivision 2.

For future background studies submitted by entities that provide the same type of services as the services you were set aside for, the set aside will apply unless:

- you were disqualified for an offense in section 245C.15, subdivision 1 or 2, or;
- DHS receives additional information indicating that you pose a risk of harm, or;
- your set aside was limited to a specific person receiving services.

In addition, those entities will be informed of the reason(s) for your disqualification unless prohibited by law.

Will my fingerprints be kept?

DHS and the Bureau of Criminal Apprehension will not keep your fingerprints. However, if an FBI check is required for your background study, the Federal Bureau of Investigation (FBI) will keep your fingerprints and may use them for other purposes.

What information can the fingerprint and photo site view and keep?

The fingerprint and photo site can view identifying information to verify your identity. The fingerprint and photo site will not keep your fingerprints, photo, or most other information. The fingerprint and photo site can keep your name and the date and time your fingerprints were recorded and sent, for auditing and billing purposes.

Who can see my photo?

Your photo will be kept by DHS. If you provide your social security number to allow your background study to be transferable to future entities, your photo will be available to those entities to verify your identity.

What are my rights about the information you have about me?

- You may ask if we have information about you and request in writing to get copies. You may have to pay for copies.
- You may give other people permission to see and have copies of private information about you.
- You may ask in writing a report that lists the entities that submitted a background study request on you.
- You may ask in writing that the information used to complete your background study be destroyed. The information will be destroyed if you have:

- (1) not been affiliated with any entity for the previous two years, and;
- (2) no current disqualifying characteristic(s).

Please send all written requests to:

Minnesota Department of Human Services
Background Studies Division
NETStudy 2.0 Coordinator
PO Box 64242
St. Paul, MN 55164-0242

How long will DHS keep my background study information?

DHS will destroy:

- your photo when you have not been affiliated with an entity for two years.
- any background data collected on you after two years following your death or 90 years after your date of birth, except when readily available data indicates that you are still living.

What is the legal authority for DHS to conduct background studies?

Background studies are completed by DHS according to the requirements in Minnesota Statutes, chapter 245C. Background studies are authorized under Minnesota Statutes, sections 256B.0943, subdivision 5a; 256B.0659, subdivision 11(a)(3); 241.021, subdivision 6(a); 144.057, subdivision 1; 518.165, subdivision 4, and 524.5-118;

What if I think my privacy rights have been violated?

You may report a complaint if you believe your privacy rights have been violated. If you think that the Minnesota Department of Human Services violated your privacy rights, you may send a written complaint to the Minnesota Department of Human Services, Privacy Official at:

Minnesota Department of Human Services
Privacy Official
PO Box 64998
St. Paul, MN 55164-0998

Updated: 02/12/2015

Student Documentation

Item to be Completed	Directions
Proof of Medical Insurance	Take a picture of your medical insurance card, print, and submit. All practicum/internship students must be covered by health insurance: your own policy, that of your parents or through Medical Assistance. Minnesota State Colleges and Universities (MnSCU) has decided to no longer offer health insurance for domestic students for the 2014-2015 academic year. There are two Minnesota Health Care Programs MnSCU students may qualify for due to their income status, they are Medical Assistance (MA) or MinnesotaCare. Students currently enrolled in Medical Assistance or MinnesotaCare programs will automatically be moved to MNsure as part of their renewal process. If a student is not currently enrolled in one of these programs and would like to know if they qualify for either of them, their eligibility status will automatically be reviewed when they apply for coverage through MNsure. Additional information regarding Medical Assistance or MinnesotaCare can be found on health insurance marketplace MNsure https://www.mnsure.org/
Proof of Immunizations	<ol style="list-style-type: none"> 1) Print a list of your current immunizations 2) Highlight/Circle the following <ol style="list-style-type: none"> a. Diphtheria – Tetanus b. Measles, Mumps, Rubella (MMR) c. Polio d. Hepatitis B e. Flu Vaccine (current) 3) If you live in MN, the link below offers suggestions on how to find your records <ol style="list-style-type: none"> a. http://www.health.state.mn.us/divs/idepc/immunize/registry/immrecords.html 4) If you live in WI, the link below takes you to the registry and your records may be available online <ol style="list-style-type: none"> a. http://www.dhs.wisconsin.gov/immunization/wir.htm
Proof of Yearly Mantoux/TB Test	Schedule an appointment and submit a hardcopy of your test results that show the date and your name
Student Background Study Form	<ol style="list-style-type: none"> 1) See attached documents. 2) Must be completed within WSU's College of Nursing and Health Sciences 3) You can NOT use one from an employer 4) Your CAN use the one from HERS 280, 348, or 350
Adult CPR Certification	These certifications are available from the American Heart Association (Healthcare Provider Course) or the Red Cross (CPR for the Professional Rescuer Course). You are responsible for keeping track of your CPR expiration date and getting re-certified in CPR if the expiration date occurs prior to the end of the internship period. CPR and Standard First Aid certifications MUST be current throughout the period of the internship. Hybrid courses are OK, but you must complete a skills component in-person. You will need to submit photocopies of CPR/AED and First Aid cards, indicating name of certification, name or organization certified through, date issued, & expiration date.
Adult AED Certification	
Adult First Aid Certification	
Professional Liability Insurance	All students in practicum or internships will be billed by Winona State University yearly for professional liability insurance coverage. The policy is an occurrence-based professional liability insurance with \$2,000,000/\$5,000,000 limits of coverage. No proof of liability insurance coverage is required from you at this time.
Other	Students will also be responsible for completing additional site-specific requirements and documentation, as requested. (i.e. Flu vaccine, Covid vaccine, Drug testing....)

Reduced Student Fee Request

Reduced Student Fee Request is located online in Warrior Space. Reduced Student Fees include the Student Union Facility Fee, Wellness Fee, Student Life Fee, Athletics Fee, & Health Service Fee ONLY. These fees will be reduced in half, if the course(s) qualify. All other fees at WSU are not reduced. Qualification requires that the course(s) be completed beyond the 35 mile radius from the Winona campus.

warriorspace.winona.edu/ProcessDirector/form.aspx?pid=cbc76cfa-e332-489a-a868-237dcf390893&formid=8e766f68-efe0-44dc-9114-28b95ff994e5&for

Reduced Student Fee Request

Reduced Student Fees include the Student Union Facility Fee, Wellness Fee, Student Life Fee, Athletics Fee & Health Service Fee ONLY. These fees will be reduced in half, if the course(s) qualify. All other fees at Winona State University are not reduced. Qualification requires that the course(s) be completed beyond the 35 mile radius from the Winona campus.

REDUCED FEES DO NOT APPLY TO ONLINE COURSES OR IF YOU ARE ENROLLED CONCURRENTLY IN ANOTHER COURSE.

Student Information

Student


Warrior ID

Star ID

Course Information

Select Term

Warrior Hub | 507.457.2800



Assignments and Evaluations

Students will meet with the internship faculty advisor to discuss review the syllabus, and discuss expectations, assignments, and evaluations. Below are the questions you will be evaluated on during your internship. All evaluations are to be:

- Completed by the internship supervisor
- Completed online (links also found on D2L homepage in Announcements)
 - Midpoint: https://winona.az1.qualtrics.com/jfe/form/SV_24RLxRVHJ0TEi4I
 - Final: https://winona.az1.qualtrics.com/jfe/form/SV_bm6qKa8R5IXDi1D
- Reviewed with the student at the appropriate time points (~300 and ~600hr)

5=Exceeds Expectations, 4=Often Exceeds Expectations, 3=Regularly Meets Expectations, 2=Sometimes Doesn't Meet Expectations, 1=Seldom Meets Expectations, NA=Not Applicable.

Behaviors	Excellent	Very Good	Average	Fair	Poor	N/A*
Shows initiative.....						
Demonstrates Team Attitude.....						
Models Wellness Lifestyle.....						
Respects Organizations policies/procedures.....						
Demonstrates sensitivity to diversity.....						
Accepts supervision/constructive criticism.....						
Skills						
Business Communication (oral, phone).....						
Organizes and completes tasks.....						
Motivates clients.....						
Written communication.....						
Presentation abilities.....						
Computer literacy.....						
Exercise Leadership/Prescriptor.....						
Administration of physical assessments.....						
Health counseling with individuals.....						
Knowledge						
Understanding Program Components.....						
Understanding Documentation.....						
Understanding risk stratification and monitoring.....						
Understanding Graded Exercise Testing.....						
Exercise Prescription and Programming.....						
Topics in Patient Education.....						
Applied exercise physiology.....						
Applied electrocardiography.....						
Applied pharmacology.....						
Health care costs/utilization.....						
Management of emergencies.....						
Facilities and equipment.....						

Please make additional comments on a separate sheet, based on student's preparation, performance and attitude. In what areas did the intern demonstrate special strengths?
In what areas does the intern need additional work?

STUDENT EVALUATION of Internship Supervisor and Site

Student Intern _____

Internship Supervisor _____

Site _____

Semester _____

Instructor/ Site Evaluation

- 5- Strongly Agree- excellent learning experience
 4- Agree- valuable learning experience
 3- Disagree- improvement would facilitate my learning
 2- Strongly Disagree- great improvement is necessary for student learning to take place
 1- Not enough information to comment

SUPERVISOR EVALUATION	1	2	3	4	5
1. Overall, the quality of my internship experience was					
2. Overall, I would rate this internship supervisor					
3. My internship supervisor let me know what was expected of me					
4. My internship supervisor had time for my questions					
5. My internship supervisor was approachable					
6. My internship supervisor challenged me to think critically					
7. My internship supervisor allowed me to make mistakes					
8. My internship supervisor is fair and impartial					
9. My internship supervisor gave me immediate feedback on my skills and performances					
10. My internship supervisor is knowledgeable					
11. I would recommend this internship supervisor to another student					
SITE EVALUATION					
12. Overall, this internship was beneficial to my learning and career development					
13. Overall, this internship provided me with a variety of experiences					
14. This site was receptive to interns					
15. This site had adequate space for learning to take place					
16. This site had adequate supplies for learning to take place					
17. This site had adequate equipment for learning to take place					
18. This site had adequate reference materials available					
19. This site had adequate learning experiences available					
20. I would recommend this internship site to another student					

Comments:

1. What did you like most about this supervisor, experience and site?
2. What did you like least?
3. Suggestions for the future?