

**SMGT 847: SPORT MANAGEMENT INTERNSHIP
WORK SITE APPROVAL AND INFORMATION FORM**

IMPORTANT: Students may not begin an internship until this form is signed by all parties.

Intern Name: _____ WSU ID: _____

Dates of Internship: _____

Semester(s)/Credit Hours to Enroll: _____

Name of Organization: _____

Student's Phone: _____

Student's E-Mail: _____

Site Supervisor: _____ Title: _____

Supervisor's Email: _____

Supervisor's Phone: _____

FOR UNIVERSITY USE:

Student Minimum 3.0 GPA
____ Submission of an internship position description
____ Submission of acceptable (a) _____ Informed of \$25.00 per credit hour fee

APPROVAL OF INTERNSHIP ASSIGNMENT:

Intern Signature Date

Site Supervisor Signature Date

Faculty Supervisor (F.S.) Signature Date

Department of Sport Management Chair Signature Date

Date internship may start, as determined by F.S.: _____ F.S. Initials: _____

• It is imperative that job description be established at the beginning of the internship. This allows all who are involved to understand what the student will hope to accomplish and will be a yardstick for measuring student accomplishment. The job description should be made up of related duties that have been mutually agreed upon by the student and site supervisor for the length of the internship. Some possible areas of involvement are listed below, but there are other work-related opportunities available.

facility preparation
 facility maintenance
 budget preparation
 budget management

community relations
 policy administration
 academic services
 compliance

personnel recruitment
 personnel training
 personnel scheduling
 personnel evaluation

2 81d [()-1942 management ()]Tic 000 ag aj(000s Tw 3.v7 en)-4 (m)1ec.6 (362ip me)12.5(rs)2ci.4)-45.e.2 > B(D)6