MEMO
TO: Microbiology Department students seeking academic credit for internships

FROM: Dr. Jennifer Walker
   Undergraduate Coordinator
   Department of Microbiology

We are delighted that you have chosen to explore the internship program offered by the Department of Microbiology. Internships help prepare you for a job while you earn hours of credit toward your degree.

Please read the guidelines carefully and talk with your advisor. You must be registered for MIBO 4970R in the semester of the internship to get credit. You must also have a faculty research mentor throughout the semester and term of the internship. You are responsible for finding a mentor and maintaining weekly or bi-weekly meetings with them to discuss your internship progress. They will also help assist with the report due at the end of the term highlighting the experience and knowledge gained from the internship. Your faculty mentor must agree to fill out a brief survey at the end of the semester to evaluate your performance.

Before you can register for the course, you must submit a completed application, provide confirmation of an internship from your employer, and you must send the files to Dr. Jennifer Walker, jrswalk@uga.edu for approval.

Your internship supervisor must also agree to fill out a brief survey at the end of the semester to evaluate your performance. Please provide us with her/his e-mail address and we will send a link to the survey.

We hope you have a terrific internship, one that challenges you and enables you to grow professionally.
Request for Approval of Internship

Name: _________________________________  Date: ____________________

UGA MyID Number (811): ________________________________

Athens Address: ________________________________________

Phone/Athens: ___________________________ Phone/Home: _________________

Email: _______________________________________

Name of Faculty Mentor: ____________________________

Email of Faculty Mentor: ____________________________

Students can earn four credit hours for each internship taken. They are required to work a minimum of 12 hours a week. You must complete MIBO 4960R on campus with a research faculty mentor before applying for MIBO 4970R as an internship. Two semesters of directed research or one semester of directed research and one semester of an internship is required for degree completion. Students can also choose to take additional semesters of directed research or an internship as elective credits to be applied toward degree requirements.

Please answer the questions below in their entirety:
Briefly describe the internship, the responsibilities, the employer, and the business location:

What semester and year will you take the internship?

Please state your anticipated start date for the internship (i.e., January 20, 2021).

Please state the total number of weeks you will work in this internship and the number of hours you anticipate working each week.

List the name, address, telephone number, and email address of your internship supervisor.
Internship Checklist

Be sure to complete the following steps to receive credit for your internship:

Before Starting the Internship

- Be enrolled in the Microbiology Major or Minor.
- Talk with your advisor about the internship. Must submit a signed copy of your graduation plan with the internship listed as recommended.
- Must have a 3.0 Overall GPA.
- Have completed the following:
  - One semester of MIBO 4960R (Directed Research) 4 credit hours.

To Apply for the Internship

- File with undergraduate coordinator, Dr. Jennifer Walker, before registration for the class. You must turn in a letter to Dr. Walker in which the employer:
  - 1) verifies that the internship is for the hours and dates provided and
  - 2) agrees to fill out an online evaluation of your performance by the final day of exams in the semester of the internship.
- Have a faculty member mentor that you will be responsible for meeting with throughout the course of the internship semester. The faculty member:
  - 1) is aware you are taking an internship and has filled out the internship mentor survey,
  - 2) is willing to meet on a regular basis to discuss your progress in the internship
  - 3) is aware of the final report you will submit once the internship is completed, and
  - 4) agrees to fill out a brief survey at the end of the semester to evaluate your performance and submit a final grade for your work during the semester.
- Submit a signed copy of this internship application to Dr. Jennifer Walker before registering for MIBO 4970R.
  - Your completed internship application packet will contain 4 key items:
    - Request for approval
    - Employer letter
    - Signed Policy memorandum
    - A copy of your advisement form with the internship listed as recommended.
- The University Policy Memorandum regarding nondiscrimination must be completed by the employer and submitted prior to the first day of the semester in which the internship is to be performed.

After the completion of the above requirements and an approval from Dr. Jennifer Walker, you will be sent the CRN to register for the course, MIBO 4970R.

Please read the statements below before registering:

- I understand that I must be enrolled in MIBO 4970R for a total of 4 hours during my internship if I wish to earn academic credit towards the Major Required I requirement.

- I understand that I will have to submit a typed report describing my project, background information on the scope of the project, and outlining the experimental approach, results and discussion of the project. The report must be submitted by the last day of exams of the semester of the internship.

- I understand that I will be graded by my faculty mentor, per UGA’s letter grading scale, and I understand that my grade for internships will be included in my academic average.

- I understand that I am responsible for turning in all required paperwork and reports on time after the completion of my internship. This includes reaching out my faculty mentor and internship supervisor to complete their required end of the semester documents.
I agree to all the above requirements and have completed all items of the checklist:
Student’s Signature _____________________________________ Date: _______________

If you have any other questions about applying for internship credit, please contact:
Dr. Jennifer Walker
Undergraduate Coordinator
jrswalk@uga.edu
MEMO:
TO: Employers of Microbiology interns
FROM: Dr. Jennifer Walker, Microbiology Undergraduate Coordinator
RE: Internship procedures

Thank you so much for agreeing to hire a Microbiology student for an internship. Professional internships are essential to the success of our students and to our Microbiology program here at UGA. We appreciate your willingness to help oversee our student’s professional development.

Would you please draft a short letter confirming that you have offered the student an internship, that you will supervise his/her work, and that you are willing to evaluate the student’s performance by filling out a brief survey?

- We need the confirmation letter before the student registers for course credit for the internship. A sample confirmation letter is attached.

- We will need the evaluation by the last day of exams during the semester the internship is taken. We will e-mail the survey to you. Please feel free to make suggestions for strengthening our internship program.

If you have questions or suggestions, please contact Dr. Walker at jrswalk@uga.edu. Again, thank you for enhancing the career of a Microbiology student!
Dr. Jennifer Walker  
Senior Lecturer and Undergraduate Coordinator  
Microbiology Department  
Biological Sciences Building  
Office 327  
University of Georgia  
Athens, GA 30602-3018  

Dear Dr. Walker:

This letter confirms that [Company Name Here] has offered an internship to [Student’s Name Here], a student in the Department of Microbiology at Franklin College of Arts and Sciences. The student will be employed for (# of hours) during the semester. We will do everything we can to make this internship a valuable learning experience.

[Include a brief description of the intern’s responsibilities.]

I agree to complete a brief online survey form that provides a summary evaluation of the student's performance of assigned duties. I will complete the survey no later than the last exam day of the semester the internship is performed. I understand a link to the online survey will be forwarded to me prior to that deadline.

Sincerely,
A. PURPOSE

(1) The purpose of this Memorandum of Understanding is to guide and direct the parties respecting their affiliation and working relationship, inclusive of anticipated future arrangements and agreements in furtherance thereof, to provide high quality applied learning experiences for University students in the Department of Microbiology while at the same time enhancing the resources available to the Facility.

(2) Neither party intends for this Memorandum to alter in any way their respective legal rights or their legal obligations to one another, to the participating students and faculty, or to any third party.

B. GENERAL UNDERSTANDING

(1) The courses of instruction (i.e., applied education programs) to be provided will be of such content and cover such periods of time as may from time to time be mutually agreed upon by the University and the Facility. The starting and ending dates for each program shall be agreed upon at least one month before the program commences.

(2) The number of students designated for participation in an applied education program will be mutually determined by agreement of the parties and may at any time be altered by mutual agreement. All student participants must be mutually acceptable to both parties and either party may withdraw any student from a program based upon perceived lack of competency on the part of the student, the student's failure to comply with the rules and policies of the Facility or the University, or, for any other reason where either party reasonably believes that it is not in the best interest of the program for the student to continue. Such party shall provide the other party and the student with immediate notice of the withdrawal and written reasons for the withdrawal.

(3) There shall be no discrimination on the basis of race, color, sex (including sexual harassment and pregnancy), sexual orientation, gender identity, ethnicity or national origin, religion, age, genetic information, disability, or veteran status in either the selection of students for participating in the program, or as to any aspect of the training; provided however, that with respect to disability, the disability must not be such as would, even with reasonable accommodation, in and of itself, preclude the student’s effective participation in the program.

C. FACILITY RESPONSIBILITIES

(1) The Facility will retain responsibility for the care of the Facility’s clients and will maintain administrative and professional supervision of students insofar as their presence and program assignments affect the operation of the Facility and its care, direct and indirect, of Facility’s clients.

(2) The Facility will provide adequate facilities for participating students in accordance with the objectives developed through cooperative planning by the University's program faculty and the Facility's staff.
The Facility will use its best efforts to make conference space and classrooms available as may be necessary for teaching and planning activities in connection with programs.

Facility staff shall, upon request, assist the University in the evaluation of the learning and performance of participating students in accordance with the Family Educational Rights and Privacy Act of 1974, as amended.

The Facility shall provide for the orientation of both University faculty and participating students as to the philosophies, rules, regulations and policies of the Facility.

Subject to the Facility's overall supervisory responsibility for client care, it may permit appropriately licensed faculty members to provide such client services at the Facility as may be necessary for teaching purposes.

All medical or health care (emergency or otherwise) that a student or University faculty member receives at the Facility will be at the expense of the individual involved.

D. UNIVERSITY RESPONSIBILITIES

The University will use its best efforts to see that students selected for participation in the program are prepared for effective participation in the training phase of their overall education. The University will retain ultimate responsibility for the education of its students.

Prior to the commencement of a program, the University will, upon request and with proper authorization, provide responsible Facility officials with such student records as will adequately disclose the prior education and related experiences of prospective student participants.

The University will use its best efforts to see that the programs at the Facility are conducted in such a manner as to enhance client care. Only those students who have satisfactorily completed the prerequisite didactic portion of their curriculum will be selected for participation in a program.

If requested by the Facility, the University will require all participating students and faculty members to show proof of liability insurance or coverage in amounts satisfactory to and Facility and to provide evidence of such insurance upon request of the Facility.

The University will encourage student compliance with the Facility's rules, regulations and procedures, and use its best efforts to keep students informed as to the same and any changes therein. Specifically, the University will keep each participating student apprised of his or her responsibility:

a. To follow the administrative policies, standards and practices of the Facility when the student is in the Facility.
b. To provide the necessary and appropriate uniforms and supplies required where not provided by the Facility.
c. To report to the Facility on time and to follow all established regulations during the regularly scheduled operating hours of the Facility.
d. To conform to the standards and practices established by the University while training at the Facility.
e. To keep in confidence all medical and health information pertaining to particular clients.

The University may require each participating student to furnish proof of a current physical examination, the results of which shall, upon request, be made available to the Facility. The parties may agree to have such examinations performed by the Facility.
E. MUTUAL RESPONSIBILITIES

(1) The parties will work together to maintain an environment of quality applied learning experiences and quality client care. At the insistence of either party a meeting or conference will be promptly held between University and Facility representatives to resolve any problems or develop any improvements in the operation of the contemplated programs.

(2) The University and the Facility acknowledge and agree that neither party shall be responsible for any loss, injury or other damage to the person or property of any student or faculty member participating in the training unless such loss, injury or damage results from the negligence or willful conduct of that party, its agents, officers or employees.

(3) Neither party is an agent, employee or servant of the other. The Regents, University, and the Facility acknowledge and agree that student participants in the training are not employees of the Regents, University, or the Facility by reason of such participation, and that they assume no responsibilities as to the student participants that may be imposed upon an employer under any law, regulation or ordinance. Student participants shall in no way hold themselves out as employees of the Regents, University, or the Facility.

(4) Unless sooner canceled as provided below, the term of this affiliation shall be ____ (___) year(s), commencing on _______ and ending on __________. This working relationship and affiliation may be renewed by mutual written consent of the parties. This agreement may be amended at any time by mutual written agreement of the parties. It may also be canceled at any time by either party upon not less than ninety (90) days written notice in advance of the next training experience.

SIGNATURES FOLLOW NEXT PAGE
AGREED TO BY:

<Name of Facility>

_____________________________________
Facility Official

________________________________
Date

THE BOARD OF REGENTS OF THE
UNIVERSITY SYSTEM OF GEORGIA
BY AND ON BEHALF OF
THE UNIVERSITY OF GEORGIA
FRANKLIN COLLEGE OF ARTS AND SCIENCES

________________________________________
Alan Dorsey, Dean

Date

Franklin College of Arts and Sciences