

TEC 398

PROFESSIONAL PRACTICE MANUAL

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PROFESSIONAL PRACTICE MANUAL

INTRODUCTION

The purpose of this manual is to provide the student and the employer with information regarding the Professional Practice experience. Goals, procedures, forms, and criteria are provided for the mutual benefit of students, employer, supervisors, and the university Professional Practice Coordinator.

It is intended that this manual will be useful to both students and employers as they make preparations for the Professional Practice experience. Additionally, it should be referred to throughout the experience so that all parties involved have a clear understanding of the procedures, requirements, and expectations of everyone involved.

Over the years, the Professional Practice experience has proven to have mutual benefit for everyone. For the student, it becomes an excellent opportunity to transition from classrooms and laboratories to positions of responsibility and challenge. For employers, it offers the chance to work with persons who have recently been involved in educational experiences and are, therefore, eager to learn how to apply their newly acquired knowledge to the workplace. And for the university staff, it offers the chance to make connections with business and industry, thereby offering the strong potential for program development and enhancement.

The cooperation of all parties concerned is needed in order for this to be a meaningful experience for everyone. Therefore, suggestions and/or concerns should be immediately shared with the Cathy McKay, Professional Practice Coordinator in the Department of Technology at Illinois State University, phone (309)438-2665, FAX (309)438-8626.

PROFESSIONAL PRACTICE IN TECHNOLOGY

Professional Practice Goals for Students:

The TEC 398 experience should lead to the following goals for students:

1. To provide the student an opportunity to apply knowledge and skills obtained in the classroom to real life situations.
2. To gain first-hand experiences associated with supervisory and/or management roles in a professional setting.
3. To achieve an orientation to the business/industrial environment, operations and procedures.
4. To assist the transition from student status to professional status.
5. To implement, develop and/or refine skills in production, management, and personnel matters.
6. To develop and refine problem-solving techniques.
7. To refine communications skills with subordinates, peers and superiors.
8. To enhance personal development in:
 - A. Good work attitudes, values, and habits
 - B. Self-confidence
 - C. Responsibility
 - D. Better understanding of career options
 - E. Realistic appraisal of strengths

Professional Practice Options:

Students may choose to complete either an internship (TEC 398.02) or cooperative work experience, commonly referred to as a co-op (TEC 398.52) under the TEC Professional Practice Program.

Internship – The internship is designed to be a **culminating educational experience** for Technology Students. Internships **last a minimum of 8 weeks**, with **students earning up to one credit hour for each 40 hours on the job**.

Co-op – The co-op allows the student to **work multiple work terms (at least three) with an employer**. **Each work term exposes the student to new duties**, thus allowing the student to gain a greater breadth of exposure to the workplace. **Each work term lasts a minimum of 8 weeks**, with **students earning up to one credit hour for each 40 hours on the job**.

SPECIFIC STUDENT OBJECTIVES:

Because of the great breadth and variety of possible Professional Practice assignments, specific performance objectives are to be formulated and enumerated on the individual student training plan.

PROFESSIONAL PRACTICE STUDENT REQUIREMENTS

The Technology Professional Practice Program is composed of internship and co-op work experiences.

- **STUDENT REQUIREMENTS FOR INTERNSHIP (TEC 398.02):**

To be eligible for a TEC *internship*, students must:

1. Be a TEC major
2. Complete 30 hours of college coursework
3. Complete 12 hours at Illinois State University
4. Your required TEC 100-series courses
5. Complete 3 hours of 200/300 level courses in your TEC sequence
6. Have an ISU major and cumulative GPA of 2.5

- **STUDENT REQUIREMENTS FOR CO-OP (TEC 398.52):**

To be eligible for a TEC *co-op*, students must:

1. Be a TEC major at ISU
2. Complete at least two semesters of ISU coursework
3. Have completed:
 - Your required TEC 100-series courses (see catalog)
5. Have an ISU major and cumulative GPA of 2.5

RESPONSIBILITIES OF THE STUDENT:

The student shall:

1. Locate a work site for Professional Practice.
2. Interview at the proposed work site following consultation with the Professional Practice Coordinator.
3. Develop, with the employer, a training plan of activities and goals which describe the student internship objectives. Outline the content and details of work assignment which will provide a variety of meaningful educational experiences. The training plan must include items which are management-oriented. The student should keep a copy of the training plan to include in the final summary report.
4. Obtain a letter of employment from the employer to include starting date, ending date, salary/compensation and the name and title of your supervisor.
5. Work the full assigned time - 8 weeks duration minimum.
6. Keep a log of all duties or work performed. This log includes duties, thoughts, impressions, contacts, conferences with supervisor, examples of paper work, etc. The log must be signed by the student and work supervisor prior to being mailed to the Professional Practice Coordinator each week. The student should keep a copy of each weekly log to include in the final summary report.
7. Prepare a midterm and final self-evaluation of the Professional Practice assignment and performance of duties. The student should keep a copy of each evaluation to include in the final summary report.
8. At the completion of the Professional Practice assignment(s), prepare a comprehensive summary paper covering the entire assignment which will be given to the Professional Coordinator within a week of the completion of duties in industry. The paper will be used in the evaluation process and will be returned to the student upon request.
9. Notify Professional Practice Coordinator of any changed mailing address from your Professional Practice application.
10. Provide own housing and transportation to and from work.
11. Notify through proper channels both the university and the company immediately of any sickness or emergency which may prevent the performance of assigned duties.
12. Abide by the employer's rules and regulations.
13. Accept the decision(s) of the employer, TEC Department Chairperson, and/or Professional Practice Coordinator, if it becomes necessary, due to unforeseen circumstances, to terminate the Professional Practice assignment prior to the end of the assignment.

RESPONSIBILITIES OF THE EMPLOYER:

1. Interview the student applying for Professional Practice.
2. Develop a formal training plan which familiarizes the student with the mission, function, and operation of the work site, as well as outline a variety of meaningful educational experiences the student will receive. The training plan should contain some items which will expose the student to the management aspects of the work environment.
3. Assign a work site supervisor who will provide guidance, direction, and constructive criticism for the student.
4. Provide safety instruction and/or workers compensation associated with the workplace.
5. Contact the Professional Practice Coordinator in the event of special problems.
6. Provide a written evaluation of the student's performance at midterm and at end of the Professional Practice assignment.
7. Allow student(s) in the Professional Practice program to observe all national holidays that may occur during the Professional Practice assignment.
8. If possible, reimburse the student for any work-related travel or expenses incurred other than to and from work.
9. Assure that adequate time is available during normal working hours for both the work site supervisor and student to conduct consultations, conferences, instruction and feedback.
10. Assure that adequate time is available during normal working hours for both the work site supervisor and the student to meet periodically with the Professional Practice Coordinator or university supervisor during visits, for purposes of consultation and appraisal of progress.
11. Provide assurance to the University of compliance with Title IX, HEW Prohibition of Discrimination on Basis of Sex. (This will be handled by the University Coordinator of Professional Practice.)

RESPONSIBILITY OF FACULTY SUPERVISOR

1. Review the TEC Professional Practice Manual and be familiar with requirements.
2. Determine if the intern's individual training plan including goals, objectives, and work assignments are appropriate and measurable. Contact the job site supervisor to introduce yourself, overview the internship evaluation process, and answer any supervision questions.
3. Review and evaluate weekly logs. Inform students of any corrective action needed in job-site behavior or reporting practices. As needed, provide guidance, direction, and constructive criticism for the student.

4. Visit intern at least once at about the mid-point of their experience. Purpose of the visit is to meet the supervisor and student, tour facility and review samples of student work to determine if the student is meeting the training plan goals and objectives.
5. Evaluate summary paper for content, appearance, and grammar and spelling.
6. Determine final grade based upon (a) Compliance with all of the responsibilities of the student as enumerated in the TEC Professional Practice Manual (weekly logs, etc.), (b) Site Supervisor's rating, (c) Faculty Supervisor rating, and (d) Site visit was a positive experience.
7. Provide *Final Evaluation Report* to Professional Practice Coordinator for the student's permanent file and for grade submission.

POLICIES AND REQUIREMENTS FOR EVALUATION OF STUDENTS

1. Professional Practice is a Credit/No-Credit course. It is NOT possible for students to earn a letter grade for Professional Practice in the Department of Technology.
2. To be eligible for the grade of "CR" the *Final Evaluation Report* may have no more than two (2) categories rated as insufficient (Checked "NO" on the rating form). If three or more categories are rated as insufficient (Checked "NO" on the rating form) the student will not receive academic credit for TEC 398 Professional Practices.
3. In order to be eligible to receive academic credit for Professional Practice, the student must complete the full work term as agreed upon in the Professional Practice student application. However, completion of the full work term does not guarantee a passing grade.
4. Student evaluation will be on the basis of the following:
 - a. Employer and/or company supervisor evaluation. This portion of the grade will be made on the basis of the attainment of objectives stated in the student training plan and observations made by the work site supervisor. These observations shall be enumerated in the midterm progress evaluation and final evaluations.
 - b. Technology Department Faculty evaluation. This portion of the grade will be the basis of the daily log, summary paper, attainment of objectives and adherence to student responsibilities

SECTION A

Eligibility and Application Procedures

CHECKLIST

DO YOU MEET STUDENT ELIGIBILITY REQUIREMENTS FOR INTERNSHIP (TEC 398.02) or CO-OP (TEC 398.52):

Internship checklist: (all boxes must be checked to be eligible for an internship)

- I am a TEC major
- I have completed 30 hours of college coursework
- I have completed 12 hours at ISU
- I have an ISU cumulative and major GPA of at least 2.5 or better
- I have completed the required TEC 100-series courses (see catalog)
- I have completed 3 hours of 200/300 level courses in your TEC sequence

Co-Op checklist: (all boxes must be checked to be eligible for a co-op)

- I am a TEC major at ISU
- I have completed at least two semesters of ISU coursework
- I have completed:
 - the required TEC 100-series courses (see catalog)
- I have an ISU cumulative and major GPA of 2.5

Pre-Enrollment Procedures Checklist (Forms may be found in the following pages)

In order to enter a 398 professional practice situation the student must:

- Meet the above listed **eligibility** requirements for either internship or co-op.
- Review the **Professional Practice Manual**.
- Submit the **application form** and a **current resume** to the Professional Practice Coordinator before the semester in which the professional practice experience is to take place.
- Obtain favorable **recommendations** from two members of the Illinois State University Department of Technology faculty familiar with your capabilities. At least one faculty member must be from the student's sequence area.
- Attend the **mandatory professional practice meeting** to discuss requirements and the procedure for securing a placement.
- Locate** an appropriate Professional Practice work site using appropriate job hunt techniques.
- Complete the **Health Insurance Certification form** from the Professional Practice Coordinator or from the following ISU's website www.ilstu.edu (Please go to Search ISU, type in health insurance certification form). If the student chooses not to purchase health insurance through the University, written verification of Health insurance from the insurance provider must be provided to the Professional Practice Coordinator
- Complete the **Release Form** (Waiver of Liability)
- Complete the **Contact Information Form**
- Obtain from the Technology Professional Practice Coordinator a **class registration permit** to enroll in Professional Practice (TEC 398.02 or TEC 398.52)

Application For Professional Practice

Applications must be submitted to the Professional Practice Coordinator in the Department of Technology. A current resume must be submitted with this application.

Name _____ U. I.D.# _____

TEC Sequence _____ e-mail _____

Local Address _____ Local Phone _____
_____ Cell Phone _____

Permanent Address _____ Permanent Phone _____

Anticipated Date of Graduation _____ Total # hours completed _____

Semester started at ISU _____

Cumulative ISU GPA _____ Major ISU GPA _____

List 200/300 level TEC course completed in your sequence: _____

What type of Professional Practice are you applying for (circle one): Intern co-op

Semester you plan to participate in TEC 398 _____

Names of two TEC faculty members who have agreed to complete recommendations on your behalf:

Are there any physical conditions or restrictions which could limit or restrict your professional practice work assignment? If so, please explain.

I, _____ have read the Department of Technology manual for Professional Practice (TEC 398) and hereby agree to comply with all regulations, policies, procedures, and responsibilities as enumerated therein. In addition, I understand that there are intrinsic dangers associated with professional practice assignments.

Signed _____ Date _____

Faculty Recommendation For Professional Practice in the Department of Technology (TEC 398)

Student Name _____ Sequence _____

Student e-mail _____ Phone number _____

Applying for internship or co-op (circle one)

Type of work experience desired (i. e.: job function or duties you would like to have)

List courses taken in area of specialization (all technical professional TEC courses):

Describe any previous work experience that may be helpful in your placement.

Faculty Name: _____

Note to student: Do not write below this line

Please rate the student on the following characteristics:

	Excellent	Above Average	Average	Below Average	Inadequate Information
Ability to work with others					
Appearance, poise, manners					
Effectiveness in speaking					
Effectiveness in writing					
Ability to follow instructions					
Dependable, prompt					
Safe work attitude					
Probable success in Professional Practice					

Briefly comment of the student's abilities, traits, and development which may help determine appropriate placement

Faculty Signature _____

Date _____

Please return to TEC Professional Practice Coordinator

Faculty Recommendation For Professional Practice in the Department of Technology (TEC 398)

Student Name _____ Sequence _____

Student e-mail _____ Phone number _____

Applying for internship or co-op (circle one)

Type of work experience desired (i. e.: job function or duties you would like to have)

List courses taken in area of specialization (all technical professional TEC courses):

Describe any previous work experience that may be helpful in your placement.

Faculty Name: _____

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Please rate the student on the following characteristics:

	Excellent	Above Average	Average	Below Average	Inadequate Information
Ability to work with others					
Appearance, poise, manners					
Effectiveness in speaking					
Effectiveness in writing					
Ability to follow instructions					
Dependable, prompt					
Safe work attitude					
Probable success in Professional Practice					

Briefly comment of the student's abilities, traits, and development which may help determine appropriate placement

Faculty Signature _____

Date _____

Please return to TEC Professional Practice Coordinator

RELEASE

STATE OF ILLINOIS)
)
COUNTY OF MCLEAN)

KNOW ALL MEN BY THESE PRESENTS

That I, _____, do hereby release, acquit, and forever

Discharge The State of Illinois, Illinois State University, its officers, employees, attorneys, representatives, insurers, and assigns, each and every person, natural or corporate, from any and all demands, causes of action and/or judgments of whatsoever nature or character, past or future, known or unknown, whether in contract or in tort, whether for personal injuries, property damage, payments, fees, expenses, accounts receivable, credits, refunds, or any other monies due or to become due, or damages of any kind or nature, which have accrued, and whether arising from common law or statute, to me, my heirs, legal representatives, successors or assigns, arising out of in any way, _____

This Release contains the entire agreement between the parties and shall be binding upon and inure to the benefit of the successors and assigns of the undersigned. EXECUTED on this _____ day of _____, 20____.

(Name)

CONTACT INFORMATION FORM

STUDENT INFORMATION:

Student Name _____
Student Address (while on internship)

(If not known address where you can receive mail)

Student Cell Phone or other _____

Student Email _____

In the case of an Emergency: Contact Information:

Name _____

Address: _____

Phone # _____

EMPLOYER INFORMATION:

Employer Name _____

Employer Address _____

Employer Phone # _____

Employer Contact Person _____

Phone # _____

Geographic Location of Internship (Town and State)

Starting Date of Internship _____

Due Date of Final Report (Wednesday of Finals Week) _____

(please write this date on your final paperwork as well – Wed of Finals)

SECTION B

Professional Practice Weekly Assignments

The following schedule and standards of performance have been developed for all students to follow during their Professional Practice assignment. It is the responsibility of the student to notify the Professional Practice Coordinator if there is any reason why the procedures presented in this manual cannot be strictly followed. The schedule outlined below contains due dates for required paperwork, including supervisor evaluations, weekly logs and summary paper.

Mail all correspondence relating to your Professional Practice to:

Cathy McKay, Professional Practice Coordinator
Department of Technology
Illinois State University
Campus Box 5100
Normal, IL 61790-5100

Phone (309) 438-2665

Fax (309) 438-8626 (note: **DO NOT FAX WEEKLY LOGS**)

The Professional Practice experience is a significant milestone in your professional development. An internship or co-op should not be thought of as just a temporary job. The work experience you are about to undertake will be one of the most meaningful learning experiences of your college career. You will be working in the best classroom available, so make the most out of this experience by working hard, always analyzing the things you see and do, and formulating goals and strategies to take you forward in your chosen career.

Student Weekly Assignments while on Professional Practice

WEEK 1: (send the following items at the end of week 1)

- Professional Practice Schedule
- Training Plan
- Letter of Employment
- Map
- Weekly Log

WEEK 2:

- Weekly Log
(Weekly Log must be sent every week)

WEEK 3:

- Weekly Log
(Weekly Log must be sent every week)
(Give Midterm Evaluation to Supervisor 1 week in advance)

WEEK 4: (send the following items at the end of week 4)

- Weekly Log
- Midterm Evaluation by Supervisor
(Meet with Supervisor to discuss Midterm)
- Midterm Evaluation by Student

WEEK 5:

- Weekly Log
(Weekly Log must be sent every week)

WEEK 6:

- Weekly Log
(Weekly Log must be sent every week)

WEEK 7:

- Weekly Log
(Weekly Log must be sent every week)
(Give Final Evaluation and Criteria to Supervisor 1 week in advance)

WEEK 8: (send the following items at the end of week 8)

- Weekly Log
- Final Evaluation by Supervisor
(Meet with Supervisor to discuss Final)
- Final Evaluation by Student
- Summary Report

Description of Student Weekly Assignments while on Professional Practice

Week 1

Professional Practice Schedule: After discussing the above items with your supervisor, complete the Professional Practice Schedule and return it to the Professional Practice Coordinator during the first week of your work term.

Training Plan: If you have not yet submitted a training plan, you must do so during the first week of your work term. The Training Plan is a list of the duties you will be expected to work on during your internship and must contain some management-oriented work duties.

Letter of Employment: Have your employer write a letter stating you will be working as an *intern* or *co-op*. The letter should include your start and stop dates, salary, and name of your immediate supervisor. Complete this letter during your first week and return it to the Professional Practice Coordinator.

Map: You must provide the Professional Practice Coordinator with a map and directions to get to your internship site.

Every Week

Weekly Logs: Weekly logs will be submitted every week you are on the job. Each weekly log must be signed by both the intern AND the site supervisor. You must keep one copy of each signed weekly log to be included in the final report. You may keep the original and send a copy of the signed log to the Professional Practice Coordinator. A more detailed discussion of the content and format of weekly logs appears on the following pages. A Weekly log must be submitted each week to the Professional Practice Coordinator.

Midterm and Completion

Supervisor Evaluations: You are responsible for providing your site supervisor with the midterm and final evaluation forms and instructions found in the Professional Practice manual. Ask your supervisor to complete the midterm evaluation and review it with you during the week which marks the midpoint of your internship. Mail the completed evaluation form to the Professional Practice Coordinator.

Ask your supervisor to complete the final evaluation and review it with you during the final week of your internship. Mail the completed evaluation form to the Professional Practice Coordinator. Prepare your Professional Practice schedule to allow you time to include a copy of the Final Evaluation in your Final Report.

Evaluation by Student: Complete the Midterm Evaluation By Student found in the Professional Practice Manual and mail it to the Professional Practice Coordinator with the Supervisor Evaluation.

Complete the Final Evaluation by Student, found in the Professional Practice Manual and mail it to the Professional Practice Coordinator with the final Supervisor Evaluation. Prepare your Professional Practice schedule to allow you time to include a copy of the Final Evaluation in your Final Report.

Completion

Summary Paper: The summary paper must be in the TEC Office no later than **4:30 PM on the Wednesday of Finals Week**. You must retain a copy of all the paperwork submitted to the Professional Practice Coordinator throughout the semester for inclusion in the summary paper (e.g.:

weekly logs, evaluations, etc.). See the Professional Practice Manual for instructions on preparing the summary paper.

Professional Practice Schedule

Complete this schedule and return it to the Professional Practice Coordinator during your first week on the internship/coop. Retain a copy of this schedule for your records and use.

STUDENT INFORMATION:

Student Name: _____

Home address while on Professional Practice: _____

Home phone while on Professional Practice: _____

Company Name: _____

Company Address: _____

Supervisor Name: _____

Supervisor Title/job function _____

Supervisor work phone: _____

Your work phone while on Professional Practice: _____

PROFESSIONAL PRACTICE SCHEDULE INFORMATION:

Your Professional Practice pay rate _____

Professional Practice Start Date: _____

Professional Practice Completion Date: _____

Midterm Evaluation Date:
(Student & Supervisor) _____

Final Evaluation Date:
(Student & Supervisor) _____

Summary Paper Due Date: _____ ***Wednesday of Finals Week*** _____

Training Plan

Note: The Training Plan is a planning tool used to help the student, employer and Professional Practice Coordinator have common expectations regarding the work duties to be assigned to the student during his or her work term. The Training Plan must be completed during or before the first work week and must include some management-oriented work duties. This form may be recreated electronically if desired. Please contact the Professional Practice Coordinator at (309) 438-2665 if you have any questions about the Training Plan.

Student Name _____ Date: _____

Title _____

Name and Address of Professional Practice employer

Name of immediate supervisor _____

Supervisor's business phone _____

Broad performance objectives (please state in measurable terms):

*The performance objectives should be described in terms of **job duties/activities which can be readily measured. Avoid "Learn about..." performance objectives which require testing to measure performance.***

A. _____

B. _____

C. _____

D. _____

E. _____

(Continued on next page)

Training Plan (Cont.)

Student Name _____

Outline of specific activities that will contribute to each performance objective

Objective A

1. _____
2. _____
3. _____
4. _____

Objective B

1. _____
2. _____
3. _____
4. _____

Objective C

1. _____
2. _____
3. _____
4. _____

Objective D

1. _____
2. _____
3. _____
4. _____

Objective E

1. _____
2. _____
3. _____
4. _____

Training Plan

Examples of good and bad performance objectives are below

Broad performance objectives (please state in measurable terms):

The performance objectives should be described in terms of job duties/activities which can be readily measured. Please avoid "Learn about..." performance objectives which require testing to measure performance.

Good Examples:

- A. Create and maintain schedules for new and current projects. **(good because it is measurable)**
- B. Establish and maintain quality management standards throughout the building process. **(good because it is measurable)**
- C. Identify, establish, and maintain safety standards and records at the job site. **(good because it is measurable)**
- D. Schedule projects and help keep projects on schedule by tracking the progress. **(good because it is measurable)**
- E. Assemble a cost history data base – based on recorded daily productions. **(good because it is measurable)**

Bad Examples:

- A. Orientation to the business' division. **(not measurable)**
- B. Construction experience on the front end. **(not measurable)**
- C. Service experience. **(not measurable)**
- D. Actively seek way to improve results and/or competencies through learning activities. **(not measurable)**
- E. Programming skills. **(not measurable)**

Weekly Log Guidelines

The weekly logs are a very important aspect of your internship experience and should be written with thoroughness and much thought. The weekly logs are used by the Professional Practice Coordinator and your site supervisor to monitor your progress and evaluate your writing skills. Also remember that your weekly logs will be a major portion of your final report, which you may use as a portfolio of your Professional Practice experience.

Weekly logs should be typed, unless special permission is granted by the Professional Practice Coordinator for neatly hand-written logs, and should be mailed to the Professional Practice Coordinator each week. Remember to keep a copy of each log to include in your final report. The content of the logs should include three items for each major activity of the day.

1. Activity Description:

The activity description is the major portion of the weekly log and is a description of the major activities/tasks performed during each day. This section may outline a new task that was initiated, or it may update/summarize the progress made on a continuing task.

2. Reaction/Thoughts:

During the completion of each task, you are encouraged to document your thoughts pertaining to the task. For example, does the task support one particular class you had in school, or does the task highlight an area that you may feel you could use additional studies? Why is the task important to the company and how was it initiated? Who is the customer for your work (internal or external) and how will they use the results of your work?

The internship/co-op experience is more than a temporary job, you should be thinking about the work experience and using the knowledge gained to formulate a plan for your professional future.

3. Training Plan Objective:

Most of the activities listed in your weekly logs should support one or more of the tasks outlined in your Training Plan. Document which training plan task is being addressed by recording the letter from the training plan objective with each activity described in the weekly log.

The weekly log should also document the hours worked each day, and a total of the hours worked for the week. Weekly logs should be mailed weekly on a day that best meets the student and supervisor schedule. A typical scenario has the student hand-writing each day's entries before leaving work (while it is still fresh). The student then types the log over the weekend and asks the supervisor to review it on Monday. The student then mails the signed log with any corrections on Tuesday or Wednesday.

A sample weekly log follows. The format for this sample weekly log should be followed unless otherwise specified by the Professional Practice Coordinator.

***** Monday, 6/17/05 - 8 hours

Activity: Worked on layout of new conveyor system for the 300 ton Cincinnati. I had to coordinate with Maintenance and Tooling in order to determine how much clearance needed to be factored in between the machine take-up reel and the conveyor system. The Tooling engineer thought Safety should be consulted on this issue in addition to Maintenance and Tooling. I contacted Safety and scheduled a meeting for Tuesday morning at 8AM (Maint. and Tooling will also be there).

Thoughts: Involving Safety is probable the best way to go with this task. We don't want to install the conveyor only to find a pinch point problem down the road. I will need to put together an agenda for the meeting to make sure that all the issues are covered while Maint., Tooling and Safety are all there.

Supports Training Plan Objective: A

Activity: Spent the afternoon working with Ron H. to make sure that the specifications for the conveyor are outlined correctly.

Thoughts: Writing a specification for a piece of equipment is a very involved process. I never realized how much planning had to go into purchasing equipment.

Supports Training Plan Objective: B

***** Tuesday, 6/18/05 - 4 hours

Activity: Met with Maintenance, Tooling and Safety to discuss clearance requirements for the conveyor system. The meeting lasted 30 minutes, and I have several action items as a result of the meeting: 1. Check with the vendor to see what the standard height of the unit will be, 2. Draw up the area on CAD to check for maximum allowable clearance. I scheduled another meeting for Monday of next week to discuss my findings with Tooling, Maint. and Safety.

Thoughts: I probably should have checked with the vendor before scheduling the meeting today. I did not think that this much information would be needed to make the decision.

Supports Training Plan Objective: A

List all major activity for the week as above.

Total hours worked: _____

Student Signature: _____

Supervisor Signature: _____

EVALUATION CRITERIA
(For Midterm & Final Evaluation of Student by Worksite Supervisor)

1. Relationship with others
 - Functions effectively within the work setting
 - Accepts constructive criticism in a positive manner
 - Obeys all rules/policies of the employer
 - Develops appropriate relationships with peers and superiors

2. Judgment
 - Develops and exercises good judgment when making decisions
 - Asks for help when needed

3. Ability to learn
 - Demonstrates the ability to learn on the job
 - Develops a good working knowledge of his/her job assignment
 - Learns from his/her mistakes
 - Accomplishes all objectives listed on his/her training plan

4. Work habits
 - Makes effective use of time
 - Dresses appropriately each day he/she reports to work
 - Takes initiative to solve problems that come up
 - Demonstrates initiative in his/her approach to accomplishing the work assignment
 - Works to improve his/her performance

5. Dependability
 - Performs all jobs assigned
 - Reports for work every work day
 - Reports for work on time every work day
 - Turns in all written reports on time
 - Performs his/her duties in accordance with instructions
 - Makes proper notification for any illness or absenteeism
 - Makes up all work days missed

6. Quality of work
 - Quality of work (service) continually improves
 - Quality of work is equal to or exceeds that of regular employees

7. Quantity of work
 - Produces a quantity of work (service) which should be rated as outstanding/superior

(Continued on next page)

8. Communications: Oral

- Communicates well with peers
- Communicates well with superiors
- Discusses his/her progress with supervisor regularly

9. Communications: Written

- Memos and reports are clear and precise
- Written work is free of grammatical and spelling errors

10. Leadership qualities

- Analyzes problems
- Adapts to situations
- Tactful
- Has ability to plan, organize, schedule
- Fellow workers respond favorably to his/her suggestions
- Commands respect and confidence

MIDTERM EVALUATION OF STUDENT BY WORKSITE SUPERVISOR

Instructions to the student: This evaluation form is to be completed midway through your assignment (as indicated on your Professional Practice Schedule) by your work site supervisor. Complete the first page and give it to your supervisor along with a copy of the Evaluation Criteria found in this manual.

Name _____

Employing Firm : Name _____

Address _____

Date term started _____ Will complete _____

Department _____ Job Title _____

Name of Supervisor _____ Title _____

Attendance: Times late: _____ Reason: _____

Time Absent: _____ Reason: _____

Pay rate: \$ _____ per _____

Brief job description

Date turned in to supervisor _____

MIDTERM EVALUATION OF STUDENT BY WORKSITE SUPERVISOR

Instructions to the work site supervisor: Please review the evaluation criteria provided by the student, then answer all questions on this page. Please review this evaluation with the student and have the student mail the evaluation to the Professional Practice Coordinator.

Traits	Above Average	Average	Below Average
Relationship with others			
Judgment			
Ability to learn			
Work habits			
Dependability			
Quality of work			
Quantity of work			
Communications: oral			
Communications: Written			
Leadership qualities			

Summary Statement: Please comment on the strengths and weaknesses in relation to the above traits.

Recommendations: Please indicate course work or other types of experiences which could improve the student's potential.

Signature of Supervisor _____ Date _____

I have read the midterm evaluation and my supervisor has reviewed it with me.

Signature of Student _____ Date _____

If your answer to #5 is "fair" or "poor", have you asked for guidance or clarification?

_____ Yes _____ No

If "no", Why not?

6. What do you expect to gain from this assignment?

7. Do you feel your supervisor knows enough about Professional Practice? _____ Yes _____ No

8. Is your relationship with your co-workers:

_____ Excellent _____ Very Good _____ Good _____ Fair _____ Poor

Explain:

9. Is your relationship with your supervisor:

_____ Excellent _____ Very Good _____ Good _____ Fair _____ Poor

Explain:

10. How well were you prepared to assume the position you hold?

Signed _____

Date _____

FINAL EVALUATION OF STUDENT BY WORKSITE SUPERVISOR

Instructions to the student: This evaluation form is to be completed near the conclusion of your assignment (as indicated on your Professional Practice Schedule) by your work site supervisor. Complete the first page and give it to your supervisor along with a copy of the Evaluation Criteria found in this manual.

Name _____

Employing Firm : Name _____

Address _____

Date term started _____ Will complete _____

Department _____ Job Title _____

Name of Supervisor _____ Title _____

Attendance: Times late: _____ Reason: _____

Time Absent: _____ Reason: _____

Pay rate: \$ _____ per _____ Gross pay for full period \$ _____

Brief job description

Date turned in to supervisor _____

FINAL EVALUATION OF STUDENT BY WORKSITE SUPERVISOR

Instruction to the work site supervisor: Please review the evaluation criteria provided by the student, then answer all questions on this page. Please review this evaluation with the student and have the student mail the evaluation to the Professional Practice Coordinator.

Traits	Above Average	Average	Below Average
Relationship with others			
Judgment			
Ability to learn			
Work habits			
Dependability			
Quality of work			
Quantity of work			
Communications: oral			
Communications: Written			
Leadership qualities			

Summary Statement: Please comment on the strengths and weaknesses in relation to the above traits.

Recommendations: Please indicate course work or other types of experiences which could improve the student's potential.

Signature of Supervisor _____ Date _____

I have read the final evaluation and my supervisor has reviewed it with me.

Signature of Student _____ Date _____

FINAL EVALUATION BY STUDENT

Name _____

Employing Firm : Name _____

Address _____

Name of Work site Supervisor _____ Title _____

This information is needed by the TEC Office to assess your feelings at the end of each Professional Practice term. This information is confidential and will be used by the TEC Office strictly for information purposes.

Complete this form on the date indicated on your Professional Practice Schedule

1. Briefly describe the progression of your work assignment.

2. How frequently has your supervisor reviewed your progress with you?

_____ Daily _____ Weekly _____ Occasionally _____ Has not reviewed

3. Is your relationship with your supervisor:

_____ Excellent _____ Very Good _____ Good _____ Fair _____ Poor

If "poor", explain.

4. How did this experience fit your academic goals?

5. How did this employing organization relate to your career goals?

6. Were there any unsolved problems that kept you from attaining full value from the experience?

_____ Yes _____ No

If "yes", please explain.

Signed _____

Date _____

Preparing the Summary Report

A summary report is required to complete the Professional Practice. It is a written presentation of your accomplishments during the work period. To help you prepare your report, you will want to consider the following items and how they can be related to your experience.

First, the Professional Practice Coordinator will consider the professional characteristics of the report. The report will be typed, double spaced, with attention to how well your ideas are expressed and, of course, correct spelling. Appearance always counts. A good report will always contain internal headings as you progress from one subject to another. Your report should look professional and be either professionally bound or contained in a binder.

As an introduction, you should give a background of the business, the size of the facility, number of employees, and the nature and scope of the business activity. An organization chart would be appropriate. This information should be related, in a general way, to what you were asked to do in your job.

A major area of your report should be concerned with the learning experience. You established a Training Plan when you started the job. The summary report should include a synopsis of the job duties as you accomplished these goals. You can relate the degree of accomplishment of each goal and what other activities and other learning goals you completed. What part of the experience was particularly interesting and what part was exceptionally dull? You might want to relate to any special training, meetings, or demonstrations that you were able to attend.

For the conclusion of the report, you might want to respond to questions relating to the value of the experience to you, and how well this will fit into your career goals. Will you maintain or modify your career goals because of the experience. Was this a realistic learning experience? Would you do it again or recommend it or similar training to others?

You may or may not have any recommendations. This part of the report would relate to program improvement, with regard to the site, supervision or procedures. It could also include suggestions on other items you have observed that would improve the program.

Be sure to include your original weekly logs with the report. Also include any work samples if possible (check with your employer first).

General outline of paper:

- I. Introduction
- II. Background of Business – Function of your department/supervisor
- III. Course Objectives (from Training Plan)
- IV. Overview and Summation of Work Experience
- V. Evaluation of Professional Practice Experience
- VI. Weekly Logs (original copies)
- VII. Supervisor's Evaluations
- VIII. Student Evaluations
- IX. Appendices of work samples, forms, etc. (optional)

FINAL EVALUATION REPORT
(To Be Completed By Faculty Supervisor)

Name of Student _____ Date of Evaluation _____

Evaluation completed by (Print Name Faculty Supervisor): _____

	YES	NO
1. Weekly Logs		
a. Logs of sufficient quality, detail and completeness to determine that training plan goals and objective are being accomplished.		
b. Logs submitted in a timely manner (mailed week)		
2. Summary Paper		
a. Content – Sufficient completeness, quality , detail to determine that training plan goals and objective were accomplished.		
b. Appearance – Professional quality report.		
c. Communication – Acceptable quality of grammar and spelling		
3. Met Training Plan Objectives		
Objective A:		
Objective B:		
Objective C:		
Objective D:		
Objective E:		
4. Student complied with all responsibilities enumerated in TEC Professional Practice Manual		
5. Site supervisor rated the quality of student performance as excellent.		
6. Faculty supervisor assessment of site visit indicated a positive experience. ”		
7. Final Grade Recommendation ”	CR	NC

Criteria For Assigning Grades: To be eligible for the grade of “CR”, no more than two (2) NO answers may be checked. If three or more NO answers are checked, the student will not receive academic credit for TEC 398 Professional Practice.