



**CORVALLIS SCHOOL DISTRICT'S**  
Community Work-based Learning Program  
**Internship Experience**

### **Course Requirements**

- Junior/Senior status
- 1/2 credit per semester - 65 hours (unpaid work) = .50 credit
- Pass/No Pass
- Limit of 1 credit in the same internship
- Quitting your internship during the semester will jeopardize your credit.

### **Required Assignments and Forms**

The following assignments are required for the semester. They need to be turned in in a Portfolio. Please see the portfolio assignment details on the other side of this sheet. See the Career Education Specialist for help with assignments.

- **Learning Contract:** with the help of your supervisor, you will establish three learning goals that are realistic and specific to your internship environment.
- **Permission Forms:** parents must sign
- **Resume:** update or create a current working resume. Information on how to put together a resume is available in this packet.
- **Cover Letter:** compose a cover letter to a company you would like to work for in the future. Information on how to put together a resume is available in this packet.
- **Career Information Search:** using the CIS system in the Career Center, investigate one career in which you are interested. Use the form in this packet titled Exploring an Occupation on the Career Information System (CIS)
- **Sexual Harassment Report:** read and summarize a brochure on Sexual Harassment. Use the Sexual Harassment brochure and Sexual Harassment Brochure Report form included in this packet. Include what you would do and/or say if you were harassed or if you observed harassment.
- **Reflective journal of at least one page, to include:**
  - Dates and times of internship
  - Place/department of internship
  - Specific tasks you completed
  - Skills you were able to practice (technical skills; academic skills; interpersonal, problem solving, communication, teamwork and customer service skills)
  - What you liked doing, what you did not like doing, new skills you learned
  - Thoughts on how your internship will help you reach your career goals
- **Evaluations:** have employer complete evaluation form included in this packet.
- **Thank You Letter:** write and send a Thank You letter to the business where you completed your Structured Work Experience.



## **INTERNSHIP PORTFOLIO ASSIGNMENT**

### **Corvallis School District**

#### **FORMAT**

- Portfolio should be put in a three-ring binder with all items hole-punched to fit in the binder.
- A cover (or title page) for the portfolio should include the following information:
  - Your full name
  - The words “Internship Portfolio”
  - Name and address of the business where you served your internship
- Include a table of contents naming the items and the page numbers where the items are located.
  - Items should be sorted in the portfolio according to the table of contents.
- All items should be typed. Journals may be handwritten.
- Neatness and a professional presentation are necessary.

#### **CONTENTS**

##### **Section A**

- Internship Learning Contract
- Internship Evaluation (completed by employer and given to you to include)
- Permission forms signed by you and your parent

##### **Section B**

- Reflective journal of at least one page, to include:
  - Dates and times of internship
  - Place/department of internship
  - Specific tasks you completed
  - Skills you were able to practice (technical skills; academic skills; interpersonal, problem solving, communication, teamwork and customer service skills)
  - What you liked doing, what you did not like doing, new skills you learned
  - Thoughts on how your internship will help you reach your career goals

##### **Section C**

- Copy of your current resume, including three references (see handout)
- Cover letter (see handout)
- Thank-you letter to your internship mentor (see handout; you must also send a copy of the letter to your host)

##### **Section D**

- CIS Exploring Occupation Assignment (see handout)
- Report on Sexual Harassment brochure (see handout)



# COMMUNITY BASED LEARNING PROGRAM PARENT / GUARDIAN AUTHORIZATION

This form notifies the parent/guardian of student participation in the Community based Learning Program, releases school liability, and authorizes medical attention in the event of an emergency. This form must be completed before the student visits the work site.

### Community Based Learning Program / Site

Student Name: \_\_\_\_\_ School: \_\_\_\_\_

Community based Learning Site: \_\_\_\_\_

Start Date: \_\_\_\_\_ Start Time: \_\_\_\_\_

Cadet Teaching     Internship     Structured Work Experience     Service-Learning

### Permission to Participate in Community Based Learning Program

I, \_\_\_\_\_ (parent/guardian), give permission for \_\_\_\_\_ (son or daughter) to be released from school to visit the site listed above for the purpose of a Community based Learning experience. I, also, agree with the travel arrangements listed. I understand that school personnel may not have visited the site, may not have met the host, will not be present when the student is at the site, and will not supervise the visit. The employees at the site may also have not been screened and criminal history verification may not have been processed. I agree to hold Corvallis School District, its officials, agents and employees harmless against any claims for injury or damage except in those cases where the acts of Corvallis School District, its officials, agents, and employees have been determined to be negligent by a court of competent jurisdiction.

### Medical Release

In the event my child may need medical treatment, I hereby consent and authorize an adult representative of the Community based Learning experience provider to permit such treatment on my behalf. I agree to be responsible for the cost of any medical services and to indemnify the Corvallis School District and the Community based Learning provider for such expense.

My child does not have any physical or mental condition which restricts or prevents him or her from participating in the scheduled activity, or which would increase the risk of harm to my child with the exception of the following:

\_\_\_\_\_  
\_\_\_\_\_

### Travel Information and Release

My student is responsible for his/her transportation arrangements. I have completed the appropriate travel permission forms on the reverse. Explained below are the travel arrangements my student and I have agreed upon.

\_\_\_\_\_  
\_\_\_\_\_

_____ Parent/Guardian Signature	_____ Date	_____ Phone Number
_____ Emergency Contact Person	_____ Emergency Phone Number	

**THIS ACTIVITY IS NOT AUTHORIZED BY THE CORVALLIS SCHOOL DISTRICT  
UNLESS THIS FORM IS SIGNED AND RETURNED PRIOR TO THE  
COMMUNITY-BASED LEARNING EXPERIENCE**



**COMMUNITY BASED LEARNING PROGRAM  
VEHICLE TRANSPORTATION PERMISSION FORM**

Employees of Corvallis School District 509J cannot authorize students to drive and/or transport other students to events in personal vehicles. We do, however, need to know what authorization is given by parents for their students to drive and/or transport other students.

By signing waivers below, I understand and assume the risks of my student's participation in vehicle transportation. For myself, my heirs, and assigns, I agree to waive, release and forever discharge any claim for injury or damage and to hold Corvallis School District 509J and their officials, agents, and employees harmless from any claim, loss, liability, or expense, including attorney fees, resulting directly or indirectly from their participation in transportation, except in those cases where the acts of the Corvallis School District 509J and their officials, agents or employees have been determined to be negligent by a court of competent jurisdiction.

**DRIVER PERMISSION FORM**

I hereby give permission for \_\_\_\_\_ to drive a personal vehicle when vehicle transportation is required for the Community Based Learning Program. My son/daughter is properly licensed to drive and is covered by liability insurance as required in the State of Oregon. I understand and accept the liability that results from the granting of this permission.

\_\_\_\_\_  
Parent/Guardian Signature                      Date                      Student Signature                      Date  
  
\_\_\_\_\_  
Insurance Carrier / Policy Number / Expiration                      Student License Number / Expiration

**RIDER PERMISSION FROM**

I hereby give permission for \_\_\_\_\_ to ride with fellow students in their personal vehicle when vehicle transportation is required for the Community Based Learning Program. I understand the liability that results from granting permission rests with the owner/driver of the vehicle.

\_\_\_\_\_  
Parent/Guardian Signature                      Date

**PERMISSION TO TRANSPORT OTHER STUDENTS**

I hereby give permission for \_\_\_\_\_ to transport fellow students in their personal vehicle when vehicle transportation is required for the Community Based Learning Program. My son/daughter is properly licensed to drive and is covered by liability insurance as required in the State of Oregon. I understand and accept the liability that results from the granting of this permission.

\_\_\_\_\_  
Parent/Guardian Signature                      Date                      Student Signature                      Date

**RIDER PERMISSION FORM WITH TEACHER**

I hereby give my permission for \_\_\_\_\_ to ride with \_\_\_\_\_  
(CSD 509J employee). I understand the liability rests with the owner/driver of the vehicle.

\_\_\_\_\_  
Parent/Guardian Signature                      Date                      Student Signature                      Date



## Resume - On-line Directions



1. Go to internet explorer type in the following web address <http://www.csd509j.net/>
2. Click on Popular Links on right side of window
3. Click on Career Learning link in drop down menu
4. Look under Resume Activity on left side of window
5. Click on Sample Resume to see an example of the type of resume you will be creating. (click the Back button)
6. Click on Resume Worksheet, print it, (click the Back button)
7. Fill out the resume worksheet with a pen or pencil as your rough draft before continuing with the Resume Template
8. Click on Resume Template
9. Save (save to your H: drive if at school)
10. Click on the generic place holder information and replace with your own information (i.e. **Name** would be replaced with your own name, **Address** with your own address, and so on)

---

### TIPS FOR AN ATTRACTIVE RESUME

- **Be Brief** - One page of well-organized information will say more good things about you than two or three pages of unnecessary details.
- **Use correct English and Spelling** - Spelling errors and incorrect grammar often give readers a bad impression of your abilities and work ethic.
- **Type your resume** - Use a computer for quick updates.
- **Avoid using the Pronoun "I"** - Identify what you did using action verbs and specific details whenever possible. For example, instead of writing "I was responsible for bookkeeping and billing", write "Billed clients and maintained accounting records".
- **Format attractively** - Use adequate margins, double spacing after each section and strive for an uncluttered appearance. Use **bolding**, underlining, CAPITAL LETTERS, bullets❖, different size fonts, multiple columns and s p a c i n g to emphasize areas.



## COVER LETTER WORKSHEET

A cover letter accompanies your resume and/or application for employment. It is a way of introducing yourself to the employer and an opportunity to “highlight” some of your resume information. A cover letter does not have to be long, but should include certain information and use correct formatting. Following is a formatting guide (assuming that you are using a computer) and ideas to incorporate into your letter:

### **STRIKE THE ENTER KEY 4 TIMES**

November 13, 2001

### **STRIKE THE ENTER KEY 4 TIMES**

Mr. John Doe  
Hewlett Packard Company      ←      Company address here  
1000 NE Circle Blvd  
Corvallis, OR 97330

### **STRIKE THE ENTER KEY 2 TIMES**

Mr. John Doe  
**STRIKE THE ENDER KEY 2 TIMES**

Body (message) of the letter:

**SINGLE SPACED**

**DOUBLE SPACING BETWEEN PARAGRAPHS**

**DO NOT INDENT PARAGRAPHS**

Paragraph 1 State your reasons for writing and identify the position you are seeking; refer to your enclosed resume.

Paragraph 2 Briefly summarize your qualifications for the job, describing the relevant training or experience that you have had; this is you change to tell them a *little* something about yourself.

Paragraph 3 Express your interest in obtaining this job and your interest in the company; state when you would be available to being working.

Paragraph 4 Ask for the next step in the application process; state specifically how and when you will follow through on you application; state that you look forward to hearing from them and tell them how to reach you.

**STRIKE THE ENTER KEY 2 TIMES AFTER THE LAST LINE OF THE BODY**

Sincerely,

### **STRIKE THE ENTER KEY 4 TIMES**

Sally Smith  
4444 NW Highland Drive      ←      Your address here  
Corvallis, OR 97330  
(541) 555-5555



CORVALLIS SCHOOL DISTRICT'S  
Internship  
**Sample Thank You Letter**

It is important to thank the person with whom you had the work-based learning experience. A personal business thank you letter does not have to be long, but it should include certain information and use correct formatting. Follow the formatting guide below:

*PRESS THE ENTER KEY 4 TIMES*

**Today's Date**

*PRESS THE ENTER KEY 4 TIMES*

**Mr. John Doe  
Hewlett Packard Company  
1000 NE Circle Blvd.  
Corvallis, OR 97330**

*PRESS THE ENTER KEY 2 TIMES*

**Dear Mr. Doe**

*PRESS THE ENTER KEY 2 TIMES*

**Body (message) of the letter:**

- 1. Thank your host for his/her time. Tell him why you appreciate his time.**
- 2. Write about something that you learned or found interesting.**
- 3. Write about something that you enjoyed during your work-based learning experience.**
- 4. Explain how this experience will help you in the future, in or after high school.**
- 5. Thank him/her again for his/her time.**

*BODY OF LETTER should be:*

- ✓ *SINGLE SPACED*
- ✓ *DOUBLE SPACING BETWEEN PARAGRAPHS*
- ✓ *DO NOT INDENT PARAGRAPHS*

*PRESS THE ENTER KEY 2 TIMES AFTER THE LAST LINE OF THE BODY*

**Sincerely**

*PRESS THE ENTER KEY 4 TIMES*

Sally Smith (your handwritten signature)

**Sally Smith  
Crescent Valley High School  
4444 NW Highland Drive  
Corvallis, OR 97330**



**Corvallis School District**

**High School Internship Learning Contract**

---

Student's Name: \_\_\_\_\_

Student's E-mail: \_\_\_\_\_

School: \_\_\_\_\_ Advisor: \_\_\_\_\_

School Phone: \_\_\_\_\_

Worksite/Organization: \_\_\_\_\_

Worksite Address: \_\_\_\_\_

Worksite Supervisor: \_\_\_\_\_

Supervisor's Phone: \_\_\_\_\_

---

Briefly describe the focus of your internship. Include: a description of the community partner you are working with, your job duties/responsibilities, etc.: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list the learning goals you developed with your parents, teachers and mentors: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What skills do you currently have that will help you successfully complete this internship? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What new skills do you think you will need to learn to be successful in this learning experience?

---

---

---

---

---

How does this experience connect to your personal educational plan and career goals? \_\_\_\_\_

---

---

---

---

---

Complete the following action plan. If needed, ask for assistance from your counselor or the Career Education staff.

Learning Goals	Activities	Resources	Target date	Completion Date & Self-Assessment



**Corvallis School District 509J  
Internship Experience Evaluation Form**



Student Name: \_\_\_\_\_ Internship Supervisor: \_\_\_\_\_

Internship Site \_\_\_\_\_ Supervisor's Phone: \_\_\_\_\_

Address: \_\_\_\_\_  
*Street*
*City*
*State*
*ZIP Code*

**Evaluation:**

*Use the following ranking system to rate Work Maturity Indicators.*

- Ranking: (4) Exceptional - Demonstrates exceptional performance. Among the best!  
 (3) Exceeds Expectations - Performs with little or no supervision. Looks for ways to achieve excellence.  
 (2) Meets Expectations - Performs consistently well with supervision. Completes assignments and tasks on time.  
 (1) Below Expectations - Requires much supervision. Inconsistent performance.  
 (NA) Not Applicable or Observed

<b>Work Maturity Indicators</b>	<b>Rating</b>	<b>Comments</b>
Personal Appearance		
Initiative		
Cooperation		
Ability to Work Alone		
Ability to Follow Directions		
Judgment and Common Sense		
Quality of Work		
Communicative Ability		
Ability to get along with fellow employees		
Show Willingness to Learn		
Attendance		
Overall Performance		
Completion of Learning Goals		

**Start Date:** \_\_\_\_\_ **End Date:** \_\_\_\_\_ **Total Hours Worked:** \_\_\_\_\_

\_\_\_\_\_  
**Supervisor's Signature**                      **Date**                      **Student's Signature**                      **Date**

**Student's Comments concerning evaluation:** \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_



---

---

## Exploring an Occupation on the Career Information System (CIS)

Name \_\_\_\_\_ Advisor \_\_\_\_\_

1. Go to Internet Explorer. CIS website: <http://oregoncis.uoregon.edu/webcis>
2. User name: **firstnamelastname** Password: **initialsstudentID#**
3. On the left hand side, look for **Occupations and Employment**. Click on **Occupations**.
4. Decide which occupation you will explore and click on the **first letter** of occupation.
5. **For each topic below, read the information and write down major points.**

**Occupation** you will explore: \_\_\_\_\_

### Overview of Career

---

---

---

---

### Specific Work Activities and Conditions

---

---

---

---

### Skills and Abilities

---

---

---

---

### Preparation

---

---

---

---

### Helpful High School Courses

---

---

---

---

### Wages

---

---

---

---



## Sexual Harassment Brochure Report

Name \_\_\_\_\_ Advisor \_\_\_\_\_

Briefly summarize the brochure: \_\_\_\_\_

---

---

---

---

---

---

---

---

What do you feel is/are the major point/s made in this brochure? \_\_\_\_\_

---

---

---

---

---

---

---

---

How does the information in this brochure relate to your occupational/career area? \_\_\_\_\_

---

---

---

---

---

---

---

---

Your thoughts and/or comments? \_\_\_\_\_

---

---

---

---

---

---

---

---



---

---

## Related Reading Report

Name \_\_\_\_\_ Advisor \_\_\_\_\_

Name of Article \_\_\_\_\_

Name of Book, Magazine, or Pamphlet \_\_\_\_\_

Date of Publication \_\_\_\_\_ Author (if shown) \_\_\_\_\_

Briefly summarize the article: \_\_\_\_\_

---

---

---

---

---

---

---

---

---

---

What do you feel is/are the major point/s made in this article? \_\_\_\_\_

---

---

---

---

---

---

---

---

---

---

How does this article relate to your occupational/career area? \_\_\_\_\_

---

---

---

---

---

---

---

---

---

---