

Use this PDF for reference. Use the PDF with pages 10-12 to complete, sign and return to the Business Management Department.



2020-2021 **Business Management**

INTERNSHIP MANUAL









APPLY BEFORE



DROP/ADD DATE

MINIMUM GPA REQUIRED



DEPARTMENT OF BUSINESS MANAGEMENT Professor David Daniel, CPA Department Chair East Stroudsburg University Gessner 309 200 Prospect Street East Stroudsburg, PA 18301 ddaniel3@esu.edu 570-422-3485

MUST BE JUNIOR, SENIOR OR GRAD STUDENT. NEED 60 CREDIT Hours +



TITLE IX COMPLIANCE:

East Stroudsburg University and its faculty are committed to assuring a safe and productive educational environment for all students. In order to meet this commitment and to comply with Title IX of the Education Amendments of 1972 and guidance from the Office for Civil Rights, the University requires faculty members to report incidents of sexual violence shared by students to the University's Title IX Coordinator. The only exceptions to the faculty member's reporting obligation are when incidents of sexual violence are communicated by a student during a classroom discussion, in a writing assignment for a class, or as part of a University-approved research project.

Information regarding the reporting of sexual violence and the resources that are available to victims of sexual violence is set forth at: http://www.esu.edu/titleix/index.cfm

Notice of Nondiscrimination: East Stroudsburg University of Pennsylvania does not discriminate on the basis of race, color, national origin, religion, sex, disability, age, sexual orientation, gender identity or veteran's status in its programs and activities in accordance with applicable federal and state laws and regulations. The following person has been designated to handle inquiries regarding this policy: Director of Diversity/Ombudsperson, 200 Prospect Street, 115 Reibman Building, East Stroudsburg, PA 18301, 570-422-3656.

Revised July 21, 2020

BUSINESS MANAGEMENT INTERNSHIP FAQS

QUESTIONS? Call the Department Secretary @ 570-422-3251 or email kraptakis@esu.edu

- 1. **Speak to your advisor.** Determine how many credits and how many hours are needed for the internship.
- 2. **Secure the internship site.** Ask whether they will allow you to do an internship for college credit. If the answer is NO, look for another internship site.
- 3. **Read the Internship Manual.** Complete pages 10 and 11 of the internship manual. Fill out and sign a pink card (Request for non-classroom credit). Make sure to sign it and have your faculty advisor sign it.
- 4. After getting your advisor's signature, **give pages 10 and 11 and the pink card to the department secretary for processing**. You will also be asked to sign a Title IX form and receive a Title IX document. It will take about a week before you see the internship on your portal. It will appear as: MGT 486 Field Experience (for Undergrads) and MGT 586 Field Experiences and Internship (for Grad students) on the portal.
- 5. **Before you start the internship**, an affiliation agreement must be signed by the company and by ESU's Provost. The department secretary will obtain the necessary signatures and will send the final document to the internship site.
 - To begin this process, send an email to kraptakis@esu.edu with the following information:
 - Company name, address, city, state and zip
 - Supervisor's name, email address and telephone number



Dear Student,

An internship is an excellent way to apply the knowledge gained in the classroom to the workforce. Although the Department of Business Management does not require internships for graduation, we encourage you to take advantage of earning credits for a qualifying internship.

You can **earn up to twelve credits** that will fulfill your free elective requirement. An internship also helps fulfill the **advanced course requirement**. Please note that in order to earn credits, you must carefully follow the guidelines in the internship manual. These requirements include submitting all internship paperwork PRIOR to beginning work at the internship site. **There is no retroactive internship credit**. You must also provide the organization's contact information so that they can sign an affiliation agreement. The department secretary will get the affiliation agreement processed.

Internships now require students to sign a Title IX document and receive Title IX literature.

Note: Your faculty internship advisor will tell you what type of paper will be required.

The deadline for submitting internship paperwork is the drop/add date for the semester.

Sincerely,

Professor David Daniel, CPA Chair Business Management Department

BUSINESS MANAGEMENT DEPARTMENT POLICY FIELD EXPERIENCE AND INTERNSHIP

PURPOSE

The purpose of the field experience and internship program is to provide students with an opportunity to integrate classroom experiences with work experiences. Students <u>are not</u> required to participate in this program in order to graduate. This program provides students with an opportunity to:

- Apply academic principles to practical problems in a work-study environment
- > Test career aspirations under controlled conditions.

RESTRICTIONS

Each individual internship shall,

- > Be procured by the student (ESU does not recruit internship opportunities);
- ➤ Be determined to be a bona-fide employment internship opportunity for growth and development befitting college level credits;
- ➤ Be limited to prepared students who can demonstrate that the internship will be at least as beneficial as an equivalent amount of classroom experience and who have met the eligibility requirements set forth below;
- > Be competed entirely within one (1) semester;

Principles of Macroeconomics

- ➤ Be supervised by a Professor (who will be appointed by the Department Chair) based upon the area of expertise;
- > Cannot exceed twelve (12) credits.

ELIGILBILTY

To apply for an internship a student must have completed at **least sixty (60) credit hours** of instruction (with a GPA of at least 2.5). In addition, the student must complete the following courses before the internship can begin:

	·	
ECON 112	Principles of Microeconomics	
MGT 200	Principles of Management	
MGT 204	Principles of Marketing	
MGT 211	Financial Accounting Fundamentals	
MGT 212	Managerial and Cost Accounting Fundamentals	
NO CREDIT wi	Il be granted if the performance of the student does not satisfy the	
cooperating organization supervisor.		

The student must perform 40 hours of field work with the cooperating agency to earn one credit.

As such:

ECON 111

3 credits requires 120 hours of field work;

240 hours = 6 credits 360 hours = 9 credits 480 hours = 12 credits

APPLICATION PROCEDURE AND CLARIFICATION

To apply for an internship:

- 1. The student shall meet with his/her faculty advisor. During this preliminary meeting, the nature of the Internship will be discussed as well as the advisability of such a course of action in relation to the student's goals.
- **2.** The student, his/her faculty advisor and the company/agency formulate the proposal for the internship. The proposal should include but not be limited to:
 - a. Company name, address and phone number
 - b. Supervisor's name and phone number and email address
 - c. Length of employment (start date, end date, number of hours to be worked)
 - d. Description of responsibilities.
 - e. Letter on employer stationary confirming terms of employment and job description/duties.
- **3.** The formal proposal shall be given to the Chairperson of the Department for review by the Advisor along with a REQUEST FOR NON-CLASSROOM CREDIT card. **The Chairperson reserves the right to amend the terms of the proposal, including the number of credits, work to be performed and the supervising professor.**
- **4.** After the Chairperson's review and approval by the Dean, the student will be formally enrolled by Enrollment Services and will receive a tuition bill for the number of credits taken. Students should understand that this will be treated like any other class for ESU billing purposes and if tuition is not paid the class will be dropped and no credit will be given.

SUPERVISION AND EVALUATION

Students are required to complete a Daily Log of his or her activities during the Internship program and to report once weekly (in writing) to the professor.

The student will be given an ESU Supervisor evaluation form. The employer must complete and either fax or e-mail the evaluation form weekly (or at least two times) to the supervising professor.

The instructor is required to make at least two (2) contacts with the intern's employment supervisor. The instructor shall confer with the intern and the supervisor concerning job performance and job related problems.

The supervisor's evaluation of the intern's performance will be factored into the final grade. **Only the instructor can assign a grade** and all work and evaluations must be received by the professor by the last day of the semester in order to allow time for submission of grades.

The student is expected to behave in a responsible manner during the internship. He or she shall exhibit a professional attitude toward assigned work and conduct himself/herself as a representative of the University.

BUSINESS MANAGEMENT DEPARTMENT EAST STROUDSBURG UNIVERSITY

INTERNSHIP WEEKLY REPORT GUIDELINES

A <u>weekly report</u> is to be given to your internship supervisor, and must include the following:

- List each of your assignments during the week and indicate the time spent on each.
- Describe new knowledge and/or skills acquired during the week.
- Explain any classroom learning that you applied to your work assignments.
- What difficulty occurred or what mistake(s) did you make on the job?
 - O What did you do to correct it/them?
- In what areas could you use help in performing your job better?
- What interesting or challenging relationship did you have during the reporting period with co-worker, a client, or your work supervisor?
 - Please describe.
- List any new management or labor-related information gained during the reporting period.
- List any new equipment, software, etc., used during the reporting period.
- Rate your work experience (i.e. excellent, good, average, or poor) during the reporting period in terms of social/political knowledge gained.
- List other comments and/or information, which should be included in your final report
- Supervisor to return completed checklist via e-mail to the supervising professor.

INTERNSHIP FINAL REPORT OUTLINE

Introduction

- How internship was secured.
- Dates of internship.
- Pay rate and weekly work schedule.
- Name and position of internship

Background

- Company or Firm History and date founded
- Mission and goals
- Founders, principal shareholders
- Competitors, product & service lines
- Growth statistics
- Organization Structure (Organization chart with titles and employee numbers).

Internship Objectives

- Summarize internship learning objectives.
- Which internship objectives were achieved and how.
- Which internship objectives were accomplished and why.
- What learning (e.g., office politics, interpersonal relationships, advancement characteristics and skills, etc.) you accomplished that were not included in the internship objectives.
- Which classroom learning aspects were helpful and provided knowledge/skills required on the job and why?
- What things did you wish you would have learned or known prior to starting the internship and why?

Work Description

- Describe the actual work, projects, and accomplishments completed on internship.
- Describe development of the projects and forms included in the Appendix.
- **NOTE**: Please do not use jargon.

Summary and Conclusions

- General reactions (good and bad) to the internship.
- Analysis of the company or firm's management.
- Specific things you would change if you could.
- Would you like to work for this firm or one like it after graduation?
- What would you tell a fellow student about to begin an internship with the same firm/supervisor?

Appendixes

- Copies of forms and reports worked on.
- Copies of computer program-developed copies.
- Copies of systems created copies.

NOTE: Do not include any confidential information in the internship supervisor's report.

EAST STROUDSBURG UNIVERSITY

Business Management Department - Student Internship SUPERVISOR'S FINAL EVALUATION REPORT

Student Name				
Professor Name				
Professor Email Address				_
Please check the appropriate block for the qu			T	T
	Excellent	Good	Fair	Poor
Attendance and punctuality during the				
internship/practicum				
Compatibility with agency staff				
Rapport with agency clients				
Acceptance of supervision and constructive criticism				
Ability to express ideas and observations clearly				
Initiative and creativity				
Ability to adapt to new social backgrounds				
Background knowledge pertinent to agency work				
Total hours performed: Please give a brief description of the nature, of intern:		ality of the wo	rk performed b	y the student
Check the appropriate letter grade for the sui	mmary perform	nance of the stu	ıdent intern.	
A = Superior		low Average		
B = Above Average C = Average	E = Fai	lure		
	С	Oate		
Supervisor's Signature				
Printed Name		itle		
Company Name		elephone #		
Please email to the faculty email address listed ab	ove or FAX to 57	70-422-3308. Inc	clude the Profess	or's Name.

INTERNSHIP APPLICATION

(Forms with missing information will not be processed)

<u>DO NOT write in pencil.</u> DO NOT write in pencil. <u>DO NOT write in pencil.</u>

A PINK "REQUEST FOR NON-CLASSROOM CREDIT" CARD MUST BE ATTACHED TO THIS APPLICATION

udent's Name Student ID #			
Major/Concentration		 	<u> </u>
Total Credits Earned	Cum QPA	Major	QPA
# of Credits for this Internship		_	
MGT 486 (Undergrad)		MGT 586 (Gr	aduate Student)
Semester Year FALL Requested Professor			WINTER
Internship NameAddress:			
City		State	Zip
Telephone Number			
Student Responsibilities and In Z. Timeline (dates of internship, co	onference dates with p	rofessor, guidelin	
dates, etc.)			
3. Culminating Activities (written re	eport, final productior	n, demonstration,	project, etc.)
Agreement St I have read and agree to carry out Management Internship Manual.	tatement and Signatu the responsibilities an		
Student Signature			Date
Professor Signature			_Date

BUSINESS MANAGEMENT DEPARTMENT INTERNSHIP SUMMARY OF CONTACT INFORMATION

MGT 486 (Undergraduate) MGT 586 (Graduate) Field Experiences and Internship Number of Credits: STUDENT INFORMATION: Name: Student ID: Address: Cell Phone: City, State, Zip Home Phone: SU Email: Best email contact: INTERNSHIP SITE / EMPLOYER INFORMATION: Organization Name: City, State, Zip: Business Telephone: Supervisor Name and Title: Supervisor Business Telephone: Supervisor Email Address: Company Website: Internship Job Title: Start Date: End Date: Work Schedule: Days/Hours: Name of Supervising Professor: Name of Supervising Professor:		
MGT 586 (Graduate) Field Experiences and Internship Number of Credits: STUDENT INFORMATION: Name: Student ID: Address: Daytime Phone: Cell Phone: City, State, Zip Home Phone: ESU Email: Best email contact: INTERNSHIP SITE / EMPLOYER INFORMATION: Organization Name: Company Address: City, State, Zip: Business Telephone: Supervisor Name and Title: Supervisor Name and Title: Supervisor Business Telephone: Supervisor Email Address: Company Website: Internship Job Title: Start Date: End Date: Work Schedule: Days/Hours: Name of Supervising Professor:	Course Name:	Internship
Field Experiences and Internship Number of Credits: STUDENT INFORMATION: Name: Address: Daytime Phone: Cell Phone: City, State, Zip Home Phone: ESU Email: Best email contact: INTERNSHIP SITE / EMPLOYER INFORMATION: Organization Name: Company Address: City, State, Zip: Business Telephone: Supervisor Name and Title: Supervisor Name and Title: Supervisor Email Address: Company Website: Internship Job Title: Start Date: End Date: Work Schedule: Days/Hours: Name of Supervising Professor:	· · · · · · · · · · · · · · · · · · ·	Semester and Year:
STUDENT INFORMATION: Name: Student ID: Address: Daytime Phone: Cell Phone: City, State, Zip Home Phone: ESU Email: Best email contact: INTERNSHIP SITE / EMPLOYER INFORMATION: Organization Name: Company Address: City, State, Zip: Business Telephone: Supervisor Name and Title: Supervisor Business Telephone: Supervisor Email Address: Company Website: Internship Job Title: Start Date: End Date: Work Schedule: Days/Hours: Name of Supervising Professor:		
STUDENT INFORMATION: Name: Student ID: Address: Daytime Phone: Cell Phone: City, State, Zip Home Phone: ESU Email: Best email contact: INTERNSHIP SITE / EMPLOYER INFORMATION: Organization Name: Company Address: City, State, Zip: Business Telephone: Supervisor Name and Title: Supervisor Business Telephone: Supervisor Email Address: Company Website: Internship Job Title: Start Date: End Date: Work Schedule: Days/Hours: Name of Supervising Professor: Office Phone:	Field Experiences and Internship	
Name: Address: Daytime Phone: Cell Phone: Cell Phone: ESU Email: Best email contact: INTERNSHIP SITE / EMPLOYER INFORMATION: Organization Name: Company Address: City, State, Zip: Business Telephone: Supervisor Name and Title: Supervisor Business Telephone: Supervisor Email Address: Company Website: Internship Job Title: Work Schedule: Days/Hours: Name of Supervising Professor: Office Phone:		Number of Credits:
Name: Address: Daytime Phone: Cell Phone: Cell Phone: ESU Email: Best email contact: INTERNSHIP SITE / EMPLOYER INFORMATION: Organization Name: Company Address: City, State, Zip: Business Telephone: Supervisor Name and Title: Supervisor Business Telephone: Supervisor Email Address: Company Website: Internship Job Title: Work Schedule: Days/Hours: Name of Supervising Professor: Office Phone:		
Address: Daytime Phone: Cell Phone: City, State, Zip. Home Phone: ESU Email: Best email contact: INTERNSHIP SITE / EMPLOYER INFORMATION: Organization Name: Company Address: City, State, Zip: Business Telephone: Supervisor Name and Title: Supervisor Business Telephone: Supervisor Email Address: Company Website: Internship Job Title: Start Date: End Date: Work Schedule: Days/Hours: Name of Supervising Professor: Office Phone:		
Address: Cell Phone: City, State, Zip Home Phone: ESU Email: Best email contact: INTERNSHIP SITE / EMPLOYER INFORMATION: Organization Name: Company Address: City, State, Zip: Business Telephone: Supervisor Name and Title: Supervisor Business Telephone: Supervisor Email Address: Company Website: Internship Job Title: Start Date: End Date: Work Schedule: Days/Hours: Name of Supervising Professor:	Name:	Student ID:
City, State, Zip Home Phone: ESU Email: Best email contact: INTERNSHIP SITE / EMPLOYER INFORMATION: Organization Name: Company Address: Supervisor Name and Title: Supervisor Business Telephone: Supervisor Email Address: Company Website: Internship Job Title: End Date: Work Schedule: Days/Hours: Supervising Professor: Office Phone: Supervising Professor: Supervis		
City, State, Zip Home Phone: ESU Email: Best email contact: INTERNSHIP SITE / EMPLOYER INFORMATION: Organization Name: Company Address: Supervisor Name and Title: Supervisor Business Telephone: Supervisor Email Address: Company Website: Internship Job Title: End Date: Work Schedule: Days/Hours: Supervising Professor: Office Phone: Supervising Professor: Supervis	Address:	Daytime Phone:
City, State, Zip		Cell Phone:
ESU Email: Best email contact: INTERNSHIP SITE / EMPLOYER INFORMATION: Organization Name: Company Address: Supervisor Name and Title: Supervisor Name and Title: Supervisor Business Telephone: Supervisor Email Address: Company Website: Internship Job Title: End Date: Start Date: End Date: Supervising Professor: Office Phone:	City, State, Zip	Home Phone:
INTERNSHIP SITE / EMPLOYER INFORMATION: Organization Name: Company Address: City, State, Zip: Business Telephone: Supervisor Name and Title: Supervisor Business Telephone: Supervisor Email Address: Company Website: Internship Job Title: Start Date: Work Schedule: Days/Hours: Office Phone:		
INTERNSHIP SITE / EMPLOYER INFORMATION: Organization Name: Company Address: City, State, Zip: Business Telephone: Supervisor Name and Title: Supervisor Business Telephone: Supervisor Email Address: Company Website: Internship Job Title: Start Date: Work Schedule: Days/Hours: Office Phone:	ESU Email:	Best email contact:
Organization Name: Company Address: City, State, Zip: Business Telephone: Supervisor Name and Title: Supervisor Business Telephone: Supervisor Email Address: Company Website: Internship Job Title: Start Date: End Date: Work Schedule: Days/Hours: Name of Supervising Professor:		
Organization Name: Company Address: City, State, Zip: Business Telephone: Supervisor Name and Title: Supervisor Business Telephone: Supervisor Email Address: Company Website: Internship Job Title: Start Date: End Date: Work Schedule: Days/Hours: Name of Supervising Professor:		
Organization Name: Company Address: City, State, Zip: Business Telephone: Supervisor Name and Title: Supervisor Business Telephone: Supervisor Email Address: Company Website: Internship Job Title: Start Date: End Date: Work Schedule: Days/Hours: Name of Supervising Professor:	INTERNSHIP SITE / EMPLOYER INFORMATIO	N:
Company Address:		
City, State, Zip:	organization value.	
City, State, Zip:	Company Address:	
Business Telephone: Supervisor Name and Title: Supervisor Business Telephone: Supervisor Email Address: Company Website: Internship Job Title: Start Date: End Date: Work Schedule: Days/Hours: Name of Supervising Professor:		
Supervisor Name and Title: Supervisor Business Telephone: Supervisor Email Address: Company Website: Internship Job Title: Start Date: Work Schedule: Days/Hours: Name of Supervising Professor: Office Phone:	City, State, Zip:	
Supervisor Name and Title: Supervisor Business Telephone: Supervisor Email Address: Company Website: Internship Job Title: Start Date: Work Schedule: Days/Hours: Name of Supervising Professor: Office Phone:	Business Telephone:	
Supervisor Business Telephone: Supervisor Email Address: Company Website: Internship Job Title: Start Date: End Date: Work Schedule: Days/Hours: Name of Supervising Professor: Office Phone:		
Supervisor Email Address: Company Website: Internship Job Title: Start Date: Work Schedule: Days/Hours: Name of Supervising Professor: Office Phone:	Supervisor Name and Title:	
Supervisor Email Address: Company Website: Internship Job Title: Start Date: Work Schedule: Days/Hours: Name of Supervising Professor: Office Phone:		
Company Website: Internship Job Title: Start Date: Work Schedule: Days/Hours: Name of Supervising Professor: Office Phone:	Supervisor Business Telephone:	
Company Website: Internship Job Title: Start Date: Work Schedule: Days/Hours: Name of Supervising Professor: Office Phone:	Supervisor Email Address:	
Internship Job Title: Start Date: Work Schedule: Days/Hours: Name of Supervising Professor: Office Phone:	Supervisor Email/Address.	
Start Date: End Date: Work Schedule: Days/Hours: Name of Supervising Professor: Office Phone:	Company Website:	
Start Date: End Date: Work Schedule: Days/Hours: Name of Supervising Professor: Office Phone:		
Work Schedule: Days/Hours:	Internship Job Title:	
Work Schedule: Days/Hours:		
Work Schedule: Days/Hours:	Start Date:	End Date:
Name of Supervising Professor: Office Phone:	Start Bate.	
Name of Supervising Professor: Office Phone:	Work Schodular Days/Hours	
Office Phone:	work schedule. Days/nours:	
Office Phone:		
	Name of Supervising Professor:	
	Office Phone:	
Inday's Date:	Today's Date:	



PRELIMINARY LETTER FOR BUSINESS MANAGEMENT INTERNS

Student Name	Today's Date		
Semester	Faculty Advisor Name		
Company or Organization			
This is a preliminary letter that prospective Business Mar manager or immediate supervisor to complete. Once co Secretary in the Business Management Department at ES	mpleted, this letter will be given to the		
The purpose of this letter is to inform the Business Mana to hire the above student as an intern.	gement Department that the company intends		
The company understands that it will need to sign an affit University in order for the student to do his/her internsh signed within the past 5 years. The affiliation agreement authority and will be returned to ESU promptly. The agr both the company representative and ESU's Provost. The internship cannot begin without a finalized affiliation. This portion is to be completed by the Internship cannot begin without a finalized affiliation.	ip, unless an affiliation agreement has been will be signed by someone with signing reement will not be final until it is signed by e student and the internship site realize that on agreement in place.		
Please provide a brief description of the student's work r			
The approximate number of hours per week the student	will work:		
Printed Name of Hiring Manager or Supervisor	Title		
Signature of Hiring Manager or Supervisor	Date		
Business Telephone Number	Business Email Address		

Please see the eligible types of businesses on the other side

The internship site should:

- Be operational for at least one year (will be reviewed on case-by-case basis)
- Have a Federal or State Tax ID number
- Have an internet presence (Website, Facebook page, Yelp reviews, etc.)
- Have one of the following forms of organization: S Corp, C Corp, LLC, Partnership, Sole Proprietorship or 501C 3
- Have a business telephone number and email address
- Have a valid business address that can be verified



East Stroudsburg University Business Management Department 200 Prospect Street East Stroudsburg, PA 18301 Department Office: 570-422-3251

FAX: 570-422-3308 All Offices located in Gessner

Business Management Contact Information			
Name	Email	Telephone	Room
Professor David Daniel, CPA, Chair	ddaniel3@esu.edu	422-3485	309
Dr. Douglas Friedman	dfriedman@esu.edu	422-3436	307
Professor Anthony Masino, CPA			
Dr. Douglas Nay	dnay@esu.edu	422-3768	313
Dr. Trib Puri	tpuri@esu.edu	422-2712	312
Professor Robert Thomas	rthomas31@esu.edu	422-3171	301
Dr. Daisy Wang	dwang2@esu.edu	422-3832	310
Dr. Yue Xi	yxi@esu.edu	422-3470	308
Dr. Weichu (Web) Xu	wxu1@esu.edu	422-3623	305
Dr. Xi (Tina) Yang	xyang1@esu.edu	422-3196	302
Karen Raptakis Department Secretary	kraptakis@esu.edu	422-3251	107