Students planning to enroll in **SPM 6947 - Graduate Internship or SPM 6948 - Advanced Practicum** must submit a proposal for approval. The typed proposal must be submitted with Page 3 of this document. The proposal is to include, in detail, a description of the internship/practicum site, your duties and responsibilities, fit with your degree plan and a timeline. Specifics of the proposal can be found on Page 2 of this document.

**Credits**

Students can enroll for 3-9 (max 9) credit hours of SPM 6947 - Graduate Internship or 1-3 (max 6) credit hours of SPM 6948 - Advanced Practicum. Students can have no more than 12 combined credit hours of internship and/or practicum count towards their required 15 elective credit hours.

Students must complete a minimum of 48 clocked work hours for each academic credit hour. Students cannot retroactively add or drop credit hours to/from the course. All work must be completed during the semester for which a student has registered. Failure to complete practicum or internship hours and duties will result in a grade penalty.

**Grading Procedures**

Students will be required to have their supervisor complete and submit a midterm and final evaluation. The final evaluation must be turned in no later than the week prior to the last day of classes. The evaluations are to be submitted to your academic advisor.

In addition, **students will be required to submit two papers.**

1. Students will submit a midterm reflection of their experiences as they relate to their proposed learning goals and objectives.
2. Students will also submit a final reflection paper regarding their experiences. When appropriate, students may work with their academic advisor to determine other documents or projects that might be more appropriate for the position in which the student is gaining experience.

**Eligibility Requirements**

Students with fewer than 18 credit hours of graduate coursework must register for SPM 6948 - Advanced Practicum. You do not need to provide proof of insurance or ensure UF has an affiliation agreement with your proposed site.

Students who have successfully completed two full-time semesters or 18 credit hours of graduate coursework can register for SPM 6947 - Graduate Internship. As part of the registration process, students must confirm with the internship office (FLG 330) that an internship affiliation contract has been agreed upon and signed by both the work site and internship coordinator. You will need to provide the following information to the internship office in order for them to create an affiliation agreement:

- Site name
- Site contact person's name, professional title, and email address
- Site address
Restrictions

- Students may not receive internship or practicum credit hours from the same department with which they are an employee or graduate assistant.
- Students may not receive internship or practicum credit hours from coaching or working as an instructor during athletic camps and/or clinics.

Internship Liability Insurance

Students registering for SPM 6947 – Graduate Internship are required to submit either the Liability Insurance Disclaimer (found on TRSM website) or a Certificate of Liability Insurance in the amount of $1,000,000 of coverage (optional). Students are also required to submit the Health Insurance Disclaimer. Although students are not required to use the insurance provider Forrest T. Jones, this option is recommended because it is the least expensive provider we have found for our students. To secure insurance with FTJ, please follow these instructions:

- You must first become a student member of Shape America for a cost of $50. In order to obtain this membership, go to http://www.shapeamerica.org/about/membership/ and click "Join Online" and follow the membership application from there. Please note that you DO NOT need to submit a confirmation page from Shape America for your internship packet.
- Once you complete this, go to www.ftj.com to obtain your professional liability insurance for a cost of $25. On the FTJ site, under Association Members, select "Education" from the drop-down menu under Select Profession; select "Shape America" from the drop-down menu under Select Association; enter your zip code; and click Go. From there, under Professional Liability Insurance, click "Student Educator Professional Liability Plan." On the next page, click "Enroll Now" and follow the prompts from there to obtain your insurance. Complete the enrollment process online rather than by mail when given the option between the two on the next page.
- You will receive several confirmation pages once you obtain the insurance. Please be sure to print and submit the page that says “Certificate of Insurance” at the top.

Internship or Practicum Proposal

This portion of your proposal is to be submitted with Page 3 of the internship/practicum proposal form as well as your Liability Insurance Disclaimer or a Certificate of Liability Insurance.

1. Please provide brief summary of the agency for which you will be working.
2. How will working for this agency fit in your degree plan?
3. What will be your duties and responsibilities?
4. What are your learning goals and objectives (at least five (5))?
   a. Please make sure your learning goals and objectives are specific and measurable as you will be reflecting on these in your midterm and final write-up.
5. Please provide a detailed timeline of your experience.
   a. Please keep in mind that all work must be completed during the proposed semester.
   b. 48 clocked work hours = 1 academic credit hour
6. What academic paper or project will you submit for a grade?
   a. Please work with your advisor or supervisor to determine the deliverable(s).
Name: ________________________________  UFID #: __________________

Classification/College: ____________________________  Advisor: __________________

UF E-mail: ____________________________  Phone #: __________________

I am requesting to be registered for _____ credit hours in the following course for: (circle one)

<table>
<thead>
<tr>
<th>Fall</th>
<th>Spring</th>
<th>SumA</th>
<th>SumB</th>
<th>SumC</th>
<th>20____</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Check Here</th>
<th>Course #</th>
<th>Course Title</th>
<th>Check Here</th>
<th>Course #</th>
<th>Course Title</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>SPM 6947</td>
<td>Graduate Internship</td>
<td></td>
<td>SPM 6948</td>
<td>Advanced Practicum</td>
</tr>
</tbody>
</table>

Name of Internship/Practicum Site: ________________________________

Address: ______________________________________________________

Phone: ______________________  Fax: ______________________

Supervisor: ______________________  Title: ______________________

E-mail Address: ______________________  Phone #: ______________________

Site Supervisor Signature ______________________  Date ______________________

- I have completed this proposal form to the best of my knowledge. Please initial: ____________
- I confirm that the duties and responsibilities in this proposal will be new experiences for me and not a part of my every day assistantship and/or job. Please initial: ____________

For SPM 6947 - Graduate Internship Registration Only (must submit 2 of 3)

- I have submitted proof of Professional Liability Insurance ($1 million). Please initial: ____________
- I have submitted the Liability Insurance Disclaimer. Please initial: ____________
- I have submitted the Health Insurance Disclaimer. Please initial: ____________

I confirm that the internship contract between UF and the agency has been agreed upon and signed.

Internship Coordinator Signature (FLG 330) ______________________  Date ______________________

I completely understand what is expected of me in order to complete the course as outlined above. The TRSM faculty member who will be responsible for my work in this course is ______________________.

Student Signature ______________________  Date ______________________

Faculty Advisor Signature ______________________  Date ______________________