Steps to Complete Graduate Internship

1. Complete readiness check section of Form A and verify readiness with Professor Hudson.
   ☐ Completion Date: _______________________

2. Locate suitable internship employer and determine their willingness to support your internship.
   ☐ Completion Date: _______________________

3. Arrange with your internship sponsor to have them prepare a list of your proposed internship job responsibilities. You will need to have this in your possession before permission can be granted for enrollment in EE 597 and before permission can be granted by ISO for work authorization (if appropriate).
   ☐ Completion Date: _______________________

4. Arrange an appointment with Professor Hudson.

   *If you are an international students, bring to this meeting:*
   a. the contact information for your internship sponsor.
   b. your completed description of your internship responsibilities provided by your proposed sponsor.
   c. your completed request for Curricular Practical Training.
   Professor Hudson will review these forms and send them to the ISO office for their review. Only after the ISO office approves will permission be granted for you to enroll in EE 597.
   d. ISO review and approval: _______________________

   *If you are a domestic student, bring to this meeting:*
   a. the contact information for your internship sponsor.
   b. your completed description of your internship responsibilities provided by your proposed sponsor.

   ☐ Completion Date: _______________________

5. Obtain enrollment permission to register for internship from Professor Hudson. This permission will only be given after Form A is completed and all relevant tasks are completed above.
   ☐ Completion Date: _______________________

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6. After approximately two weeks in your internship position, complete with your Company Internship Coordinator Form B and have it delivered to Professor Hudson.
   □ Completion Date: __________________________

7. At the completion of your required internship hours, work with your company internship coordinator to complete Form C and have it sent to Professor Hudson.
   □ Completion Date: __________________________

8. Prepare your internship report using the guidelines provide by Professor Hudson.
   □ Completion Date: __________________________

9. Arrange an appointment to meet with Professor Hudson to discuss your Final Report – which will be placed in your student file – and to complete your Education Outcomes Assessment of your internship experience.
   □ Completion Date: __________________________

Note: International students must be enrolled full time during regular semesters, and must be moving toward timely completion of their degree in order to be involved in the internship program.

Only after all of these requirements have been met will it be possible to assign credit for this experience.
Minnesota State University, Mankato
Electrical and Computer Engineering and Technology
Engineering Graduate EE 597 Internship

Form A

Date __________________________
Student Name __________________________
Address __________________________
City____________ State _____ Zip ____________
Phone _______ - _______ - _______
E-mail __________________________
Title and Description of Internship Position

________________________________________________________________________
________________________________________________________________________
Company / Organization

________________________________________________________________________
Credit hours of internship requested ________________
Hours committed to work for total internship credit ________________
Anticipated Starting Date ________________
Contact Person __________________________
Contact Phone # _______ - _______ - _______

Readiness check: Please list all graduate courses taken and grade received:
Course
______ _______ _______
______ _______ _______
______ _______ _______
______ _______ _______
______ _______ _______
______ _______ _______
______ _______ _______

(This form to be maintained as part of the student file!)
(This form must be received before the student will be allowed to register for internship)

Date __________________________
Student Name ____________________
Supervisor Name ___________________
Company _________________________
Company Address ________________________
City __________________ State _____ Zip _____________
Phone ______-____-________
E-mail ____________________________
Title of Internship Position ________________________________
Anticipated Starting Date __________________________
Anticipated Hours / Week __________________________

Please use page 2 of Form B for a description of duties / responsibilities.

Please mail in a company letterhead envelope to:

Dr. William B. Hudson
Department of Electrical, Computer Engineering and Technology
137 South Trafton Science Center
Minnesota State University
Mankato, MN 56001

Phone: 507-389-5639
E-mail: william.hudson@mnsu.edu
Please describe the duties / responsibilities of the internship position. Of special interest will be the extent of involvement with electrical / electronic hardware and computer and network equipment.

Employer/Supervisor: ____________________________  Date: ____________
Minnesota State University, Mankato
Electrical and Computer Engineering and Technology
Engineering Graduate EE 597 Internship

(This form to be maintained as part of the student file!)
To be completed by the Employer/Supervisor following completion of the internship experience.

Date ____________________________
Student Name ____________________________
Supervisor of Intern ____________________________
Title ____________________________
Company ____________________________
Address ____________________________
City ____________________________ State ______ Zip ____________
Phone _______ - _______ - _______
E-mail ____________________________
Title of Internship Position ____________________________
Ending Date of Internship Experience ____________________________

Please use page 2 of Form C to describe the performance of the student in the internship position and any recommendations regarding the internship program.

Please mail in a company letterhead envelope to:

Dr. William B. Hudson
Department of Electrical, Computer Engineering and Technology
137 South Trafton Science Center
Minnesota State University
Mankato, MN 56001

Phone: 507-389-5639
E-mail: william.hudson@mnsu.edu
1. Evaluate the student’s performance of assigned tasks.

2. Evaluate the preparation of the student for the internship position. Consider strength and weaknesses and how the student compared with other beginning employees. Please make any suggestions for changes in our curriculum that would make student interns more effective for your organization.

3. Summarize your reactions to the internship program. Please suggest ways in which the program might be improved.

4. Would you / your company be interested in employing student interns from our program in the future?

Employer/Supervisor: ___________________________    Date: ____________

(This form to be maintained as part of the student file!)
Educational Outcomes Assessment

To be completed by the supervising professor following completion of the internship experience.

Student Name ________________________________

Please check the appropriate outcomes for experiences that the student has developed through the internship process. (Please use extra space provided to list additional outcomes.)

- Effectively identify, formulate, and solve an engineering problem.
- Understand professional and ethical responsibilities.
- More effectively communicate orally and in written form.
- Understand the documentation process for an engineering design problem.
- Better understand project management and rudimentary economic considerations associated with an engineering problem.
- Participate in a group atmosphere for the defining, planning, and execution of open-ended problems.
- Use software tools appropriate to solve engineering problems.

Professor: ____________________________  Date: __________
Grade Assigned: __________

(This form to be maintained as part of the student file!)