

Political Science 3191/4191

Enrollment Checklist

Please email the below items to *Sydney Green.2525@osu.edu* or drop them off in person at 2014D Derby Hall, Monday through Friday, between 8:00 a.m. and 5:00 p.m.

Please note: You may only earn Political Science credit(s) once per workplace and you cannot earn credit from different departments (like Communications or International Studies) or a different school (like Glenn) for the same workplace and term that you seek to enroll in 3191 or 4191. If enrolling in 3191 and/or 4191 will put you over the 18-hour maximum number of credit hours, please fill out an over 18-hour petition.

If you have any questions and/or concerns, please contact the Internship Coordinator, Sydney Green, at green.2525@osu.edu.

The following must be submitted together at the same time:

- Internship Information Form
- Terms of Agreement Form
- Internship Statement and/or Position Description
 - Must describe your responsibilities at this internship and how this experience will enrich your knowledge and understanding of government, policy, public affairs and Political Science
- *International Internship Only*
 - Confirm that the country you are visiting is NOT a risk of designated area as determined by the US Department of State. Current list can be found here by ctrl&click the link below
<https://travel.state.gov/content/travel/en/traveladvisories/traveladvisories.html/>
 - Enroll in OSU's supplemental insurance plan. Contact <https://oia.osu.edu/> for details.

As a reminder, all academic assignments as described in course syllabus (on Carmen) must be submitted to receive credit!

Internship Information Form

☐ 3191 (1 credit hour, graded S/U)

☐ 4191 (3 credit hours, graded A-E)

Semester/Term/Year of Proposed Enrollment: _____

Student's Name

OSU email address (name.#)

Local Street Address

Phone Number

Major/Minor(s):

Expected Semester/Year of Graduation:

Current Cumulative GPA:

Are you currently or have you received any academic credit for internships in the past? _____

If yes, please list course and term _____

Have you received internship credit for *this* workplace in the past? _____

Please note, you cannot earn Political Science credit more than once in each workplace

If yes, please list course and term _____

Are you interning for a political campaign? _____

If yes, please provide the month and year of the election _____

Organization/Company Name

Evaluating Supervisor's Name

Organization/Company Address

Evaluating Supervisor's e-mail

Title of Internship Position

Evaluating Supervisor's phone

Political Science Department Approval

Internship Coordinator

Date

Course #

Terms of Agreement

Student's Name

OSU email address (name.#)

Student Section

I understand and agree to the following:

1. I will work a minimum of 90 total hours during the semester at the internship doing meaningful and responsible work. I understand that academic credit will be awarded based on satisfactory fulfillment of conditions identified in the course description and syllabus and after all relevant forms and evaluations have been submitted with appropriate signatures.
2. The academic project(s) associated with the internship experience will be under the direction of the Political Science internship coordinator and will be structured to provide me with the opportunity to enhance my theoretical understanding of the internship work, to apply concepts and skills developed through classroom education, and to acquire new concepts and skills. I will submit all course work as well as my employer's evaluation my performance in the manner and by the dates outlined in the course syllabus.

Student's Signature

Date

Internship Supervisor Section

Evaluating Supervisor's Name

Supervisor's Title

Supervisor's Phone No./Ext.

Supervisor's email address

I understand that this student is required to work a minimum of 90 hours during the academic term doing meaningful and responsible work. I have also reviewed and approved the description of this internship that the student has attached to this form.

My signature indicates my consent to serve as the supervisor for this student and to evaluate the student at the end of the term. I understand that my evaluation will count as significant portion of the student's grade.

This internship experience complies with all federal, state and local laws and regulations.

Evaluating Supervisor's Signature

Date
