Student Name: ________________________________

Student Major & Concentration: ________________________________

This Semester # 195 Units: ______; Previous # of 195 Units Taken:_____

Total # Semester Units: ______

Semester Enrolled (Ex. Spring 13’): __________

Communication Studies & Journalism
Teaching Assistant Internship

To Proposed Teaching Associate Supervisors:

Guidelines for Teaching Associate positions for ComS or Jour 195 credit:

1. Teaching Associate internships with undergraduate students are limited to full time instructors.

2. Each TA position will be limited to 1 unit of credit in ComS or Jour 195. If a professor wants a student to earn 2 or 3 units of credit, then the professor must clearly explain the reasons to Dr. Robert Humphrey, the Internship Coordinator.

3. The agency supervisor must be available regularly, provide appropriate level and amount of direction and supply feedback to the intern on a scheduled basis. The level and amount of direction may vary. Some situations require frequent contact and detailed directions; others may require only that the student's work be checked and evaluated when completed. But the intern should not be left to find his or her own work, to create his or her own schedule, or to evaluate the results of his or her activity.

Student should complete this section:

1. Student Name: ________________________________

   Phone Number: _________________ Student Number: ________________

   Mailing Address: ____________________________________________________

   E-Mail Address: ____________________________________________________
A. Have you taken and/or are currently taking (this semester) COMS 100A &/or JOUR 130?

COMS 100A  Grade: _____  Instructor: __________________
JOUR 130  Grade: _____  Instructor: __________________

I have not yet, and I am not currently taking either ComS 100A or Jour 130
(MUST Attach copy of grade for COMS 100A/JOUR 130 from My Sac State)

Supervising professor should complete this section:

1. Name of Professor: ____________________________________________

   Office Room #: ___________________ Phone: _________________________

   Email: __________________________________________________________

2. In which class will the student TA be assisting?
   a. Department & Number ____________________________________________
   b. Name of Course ________________________________________________

3. Please describe in detail the activities, duties, and/or responsibilities for the TA position.
   (You may list these duties on another sheet of paper and attach, if necessary.)
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________ -

4. List the Communication Studies and/or Journalism courses the student has taken, the abilities and experiences that qualify this student to successfully fulfill the responsibilities of this position, and the knowledge/skills that the student will acquire during the semester.
   a. The student already has taken these courses and currently possesses these skills:
      ___________________________________________________________________
      ___________________________________________________________________

   b. The student should acquire these skills while completing the internship:
      ___________________________________________________________________
      ___________________________________________________________________

5. How many hours and weeks will the position require?  _____  _____
   Hours  Weeks
If the internship does not follow an hours-per-week pattern, how many total hours are required and what dates are to be worked? (Approximately)

________________________________________________________________________
________________________________________________________________________

6. Supervisors are expected to spend some time working with TAs; but the amount and type of supervision will vary. Which of the following descriptions best describes the pattern of supervision?

a. Work side-by-side with the TA -- yes / no.
b. Meet with the TA frequently to answer questions and check progress -- yes / no.
c. Assign TA a project; check progress occasionally; available for questions -- yes / no.
d. Other (please explain):

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

If you have any questions, please contact the Internship Coordinator:

Robert Humphrey - (916) 278-7895 or Internship Coordinator Assistant - (916) 278-5316

Signature of Professor __________________________________________________________

Date ________________________________

Complete and return this application to the Main Office (MND 5014). If you have additional questions or concerns regarding the Internship process, please see the Internship Coordinator or Assistant.

------------------------ Office Use Only ------------------------

Approved - yes / no? _______ ________________________________

Initials Date

If not, why:

________________________________________________________________________
________________________________________________________________________

Student contacted about decision ________________________________

Date Initial