

AUT 320

Automotive Internships & Cooperative Education

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Southern
Illinois University
Carbondale

Students enrolled in the Automotive Technology Baccalaureate Degree program are given the opportunity to earn college credit while on a paid cooperative education or internship work experience with an approved business, corporation, organization, or government agency in the automotive field. This work experience period serves as an experiential learning activity that is designed to help students apply academically learned concepts, theories, principles, and skills in a workplace setting. Students will have the opportunity to gain additional knowledge, expertise, and work experience while allowing the employer the opportunity to develop potential future employees and complete timely projects.

To participate in the Southern Illinois University Carbondale (SIUC), Automotive Technology Internship (AUT 320) or AUT Automotive Cooperative Education (AUT 220) and Automotive Service Operations Internship (AUT 420) the following must be understood:

1. The student has read and fully understands the Internship/Cooperative Education Guidelines as outlined in the appropriate Master Syllabus.
2. The Work Site Agreement Form must be completed, returned to the Department Internship/Cooperative Education Coordinator, and approved prior to being enrolled in the class. This will become part of the student's permanent record file.
3. Students serving in an internship/cooperative work experience must have health insurance coverage. Questions regarding the SIUC Student Medical Benefit (Student Insurance) can be addressed to Student Health Programs at 618.453.3311.
4. Grades will be determined by the following:

Performance Evaluations. A separate evaluation is required at the end of each calendar month of work experience.

The evaluation form is to be completed by the student's assigned supervisor (as indicated on the Work Site Agreement form) and returned to the Coordinator once completed. It is the student's responsibility to ensure that their supervisor completes the evaluation and returns it to the Coordinator. It is recommended that the student communicate with their supervisor as the end of each calendar month approaches and present the evaluation form to them. These evaluations will become part of the student's permanent record file. Once again, it is the student's responsibility to give the evaluation forms to their supervisor for completion.

Activity Log. A brief log of student activities and/or duties for each day of the work experience period is required.

This log must be current up to 1 week prior to the end of the enrolled semester when all paperwork must be submitted to the Coordinator.

Final Report. A 3 – 4 page single-spaced report covering the nature of the student's assignment and how the experience helped in obtaining their career objectives is required. This report should concentrate on 1 or 2 major points of knowledge gained during the work assignment. The attached writing assessment and evaluation form will be used to grade the final report.

Both the Activity Log and Final Report need to be submitted to the Coordinator 1 week prior to the end of the enrolled semester. All reports and logs must be produced on a word processor and printed for professional quality. Reports will be graded on format, spelling, punctuation, cohesiveness, analytical skill and others as outlined on the Automotive Technology Writing Assessment and Evaluation form. Students can submit the required paperwork to the Coordinator via postal service, fax, or e-mail. If there are any questions regarding the submission date or materials, please contact the Coordinator.

5. The Department Internship/Cooperative Education Coordinator will contact the student and employer during the work experience period to assess the student's progress. This requires the student to keep the Coordinator informed of any changes as the work experience progresses. (i.e. supervisor, job duties, phone number, e-mail address . . .)

Student Responsibilities:

- Complete Work Site Agreement form.
- Ensure health insurance coverage during work period.
- Keep Coordinator informed of progress and/or changes.
- Present evaluation form to supervisor for completion at the end of each month.
- Ensure completed evaluation forms are returned to the Coordinator.
- Send Work Log and Final Report to Coordinator 1 week prior to the end of the enrolled semester.

**MASTER SYLLABUS
COLLEGE OF APPLIED SCIENCES AND ARTS
AUTOMOTIVE TECHNOLOGY**

COURSE NUMBER AND TITLE: AUT 320 – 1-12 Automotive Internship

COURSE DESCRIPTION:

Students will participate in a departmentally approved automotive related internship that includes formal instruction, training and/or career related work experience. Students receive a salary or wages and engage in prearranged assignments related to their academic program and career objectives. Departmental faculty evaluations, supervisor performance evaluations, and student reports are required. Internship experiences may be in one of the following areas: automotive service technical, engineering, parts, business, management, training, or government agencies. Hours and credits to be individually arranged. Prerequisite: Consent of department.

PREREQUISITE TO: None

COURSE OBJECTIVES:

1. The automotive internship program should supplement the student's academic program with automotive experience within the planned career path.
2. This course will provide the student an opportunity to gain professionally supervised work experience in industry, business, or government.

AUT 320 GUIDELINES:

1. The student is responsible for locating and securing the internship position. The automotive department will assist in developing and identifying internship opportunities.
2. The work site must be approved by the automotive department prior to the internship experience.
3. Registration for AUT 320 will be completed after the internship position is assured and before the internship experience has begun.
4. Each semester hour of internship credit requires 100 hours of work experience.
5. The Automotive department internship coordinator will visit the internship site when practical.
6. The employer must complete cooperative education evaluation forms, a minimum of twice per semester.
7. When accepting an off-campus internship experience, the student should check the following:
 - A. Health insurance coverage (Student health insurance, employer insurance, or through parent's health insurance).
 - B. Arranging housing contracts at SIUC and at the internship work site.
 - C. Effects the internship work experience may have (possible part-time status) on grants, scholarships, and loans.
8. The following written assignments are required:
 - A. A typewritten log of daily activities.
 - B. A 3 – 4 page single-spaced report covering the nature of the student's assignment and how the experience helped in obtaining their career objectives is required. This report should concentrate on 1 or 2 major points of knowledge gained during the work assignment.

All internship related paperwork, assignments, reports, and evaluations are due in the Internship coordinator's office one week before the semester ends. The mailing address is:

**Southern Illinois University Carbondale
Automotive Technology
Mail Code 6895
Carbondale, IL 62901**

**Phone: 618-453-4024
Fax: 618-453-8483**

**Writing Assessment & Evaluation Form
Southern Illinois University Carbondale
Automotive Technology Department**

Student's Name: _____

Date: _____

Abbreviated Title: _____

(1) Responds fully to the assignment	EXCELLENT	VERY GOOD	ADEQUATE	WEAK	POOR
(2) Presents a topic statement identifying the issue and the position	EXCELLENT	VERY GOOD	ADEQUATE	WEAK	POOR
(3) Exercises good critical thinking and/or analytical skills	EXCELLENT	VERY GOOD	ADEQUATE	WEAK	POOR
(4) Expresses its purpose clearly and persuasively throughout	EXCELLENT	VERY GOOD	ADEQUATE	WEAK	POOR
(5) Uses appropriate supporting details and/or evidence	EXCELLENT	VERY GOOD	ADEQUATE	WEAK	POOR
(6) Is focused, well organized, and unified	EXCELLENT	VERY GOOD	ADEQUATE	WEAK	POOR
(7) Uses language that is appropriate for the audience	EXCELLENT	VERY GOOD	ADEQUATE	WEAK	POOR
(8) Uses discerning sources when appropriate	EXCELLENT	VERY GOOD	ADEQUATE	WEAK	POOR
(9) Correctly documents and cites sources as needed	EXCELLENT	VERY GOOD	ADEQUATE	WEAK	POOR
(10) Is free of errors in grammar, punctuation, word choice, spelling, and format	EXCELLENT	VERY GOOD	ADEQUATE	WEAK	POOR
Overall Evaluation	EXCELLENT	VERY GOOD	ADEQUATE	WEAK	POOR

ADDITIONAL COMMENTS:

**Internship Student Evaluation Form
Southern Illinois University Carbondale
Automotive Technology**

Student: _____

Worksite: _____

ID #: _____

Work Period Month of: _____

To the employer: This evaluation form serves two purposes:

1. To assist the College in evaluating the needs of the student so that he/she will become a more valuable employee.
2. To assist SIUC in evaluating the student for a cooperative work experience grade.

What are the student's duties and responsibilities or his/her assignment?

Please indicate your assessment of the student using the following scale: (Please circle one for each category)

- 5 Outstanding**
4 Above Average
3 Good/Average
2 Slight Improvement Needed
1 Much Improvement Needed
N/A Not Applicable or Cannot Assess.

Technical Skills (if applicable to job duties)	
Engine Repair	5 4 3 2 1 N/A
Automatic Trans/Transaxle	5 4 3 2 1 N/A
Manual Drive Train & Axles	5 4 3 2 1 N/A
Suspension & Steering	5 4 3 2 1 N/A
Brakes	5 4 3 2 1 N/A
Electrical/Electronics Systems	5 4 3 2 1 N/A
Heating & Air Conditioning	5 4 3 2 1 N/A
Engine Performance	5 4 3 2 1 N/A
Overall Technical Skills	5 4 3 2 1 N/A

Non Technical Skills (if applicable to job duties)	
Oral Communication Effectiveness	5 4 3 2 1 N/A
Written Communication Effectiveness	5 4 3 2 1 N/A
Punctuality & Attendance	5 4 3 2 1 N/A
Dependability & Responsibility	5 4 3 2 1 N/A
Diligence & Perseverance	5 4 3 2 1 N/A
Initiative, being a self starter	5 4 3 2 1 N/A
Works well with others	5 4 3 2 1 N/A
Management/Leadership Characteristics	5 4 3 2 1 N/A
Overall Non Technical Skills	5 4 3 2 1 N/A

COMMENTS: Please make comments regarding the student's work performance.

What is your overall evaluation of the student? (Please check one)

- Outstanding*
 Very Good
 Average
 Below Average
 Unsatisfactory

Have you discussed this evaluation with the student? Yes No

Evaluator Signature: _____

Date: _____

Return by fax or mail as soon as possible to:

Michael B. Behrmann (618) 453-4024 Phone
Southern Illinois University (618) 453-8483 Fax
Automotive Technology - 6895 E-mail: mbehr@siu.edu
Carbondale, IL 62901



Southern
Illinois University
Carbondale

Dear Employer:

Thank you for participating in the Southern Illinois University Carbondale (SIUC), Automotive Technology Internship/Cooperative Education Program. Students enrolled in the Automotive Technology Baccalaureate Degree program are given the opportunity to earn college credit while on a paid cooperative or internship work experience with an approved business, corporation, organization, or government agency in the automotive field. This allows the student an opportunity to gain additional knowledge, expertise, and work experience while allowing the employer the opportunity to develop potential future employees and complete timely projects.

For the student to receive credit, the following requirements must be satisfied:

- The amount of credit that a student may earn is 1 credit hour per 100 hours of supervised paid work experience.
- The student, the employer, and the SIUC Automotive Internship/Cooperative Education Coordinator must complete the Work Site Agreement form. The completed agreement must be returned to the Coordinator's office no later than the first day of the work experience period.
- The SIUC Automotive Technology program will determine the suitability of the cooperative work location and will monitor the cooperative experience.
- The employer must agree to supervise and evaluate the student during the cooperative work experience. The student will give their work site supervisor an evaluation form to be completed and returned at the end of each calendar month during the work period for which the student is receiving credit.
- The student will be required to complete the following written assignments:

Daily Work Log. A brief log of their activities and/or duties for each day of the work experience period.

Final Report. A 3 – 4 page single spaced report covering the nature of their assignment and how the experience helped them in meeting their career objectives, concentrating on 1 or 2 specific points of knowledge gained.

If you should have any questions, or concerns please feel free to contact me. Once again, thank you for employing an SIUC Automotive Technology student during their work experience period of training.

Sincerely,

Michael B. Behrmann, Internship/Cooperative Education Coordinator
Southern Illinois University Carbondale
Automotive Technology - 6895
Carbondale, Illinois 62901
Phone: 618.453.4024
Fax: 618.453.8483
E-mail: mbehr@siu.edu

Southern Illinois University Carbondale
Automotive Technology Department

Automotive Internship/Cooperative Education – Worksite Agreement

This course provides the student with an the opportunity to earn college credit while on a paid cooperative education or internship work experience with an approved business, corporation, organization, or government agency in the automotive field. The student, the internship coordinator, and the work site supervisor agree to follow the Cooperative Education Guidelines as outlined in the Master Syllabus.

I. To Be Completed By The Student (please print or type)

School Term _____			Credit Hours _____
Last Name _____	First _____	Middle Initial _____	University I.D. No. _____
Address _____			E-Mail Address _____
City _____	State _____	Zip _____	Telephone Number _____
Student Signature _____			Date _____

By signing this agreement, I fully understand the effects of accepting an off-campus cooperative work period may have in regards to insurance, housing, and any grants, scholarships or loans.

II. To Be Completed By The Automotive Technology Department (please print or type)

Mike Behrmann _____	618-453-4024 _____
Internship Coordinator	Phone
Internship Coordinator Signature _____	Date _____

III. To Be Completed By The Employer (please print or type)

Company Name _____			Telephone Number _____
Address _____			FAX Number _____
City _____ State _____ Zip _____			Is the student paid on this work experience? <input type="checkbox"/> Yes or <input type="checkbox"/> No
Student's Job Title _____			Hourly Wage or Salary (Optional) _____
Work Dates: from: ___/___/___ to: ___/___/___			Number of Hours Per Week _____
Brief Description of Duties: _____			

Supervisor Name & Title _____			Supervisor E-mail Address _____
Supervisor Signature _____			Date _____