CMJ 495 Application Form
Internships in Communication and Journalism

(Application must be submitted and approved before enrollment in CMJ 495)

Part One (to be completed by applicant)

Semester and year of internship __________

Credit hours sought __________

Name ____________________________ ID# ______________

Local Address __________________________

Phone ___________________________ Email __________________________

Major ___________________________ Overall GPA _______ GPA in major ______

Credit hours earned to date ______

Will you have earned at least 53 credit hours before BEGINNING your Internship?
(circle) YES NO (circle) JR/SR standing YES NO

Have you taken at least 12 credits of CMJ courses? YES NO

Please list courses you have taken that provide a background for this internship

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Personal Address while doing internship (if different from above)

________________________________________________________________________

________________________________________________________________________

Phone ___________________________ Email ______

On an attached page, please provide the following information:

1. A brief description of the duties you will perform during the internship. Be as specific as possible.

2. A concise statement about the things you hope to learn from the internship. For example: What questions about your career will you try to answer? What aspects of your prior course work will be helpful to the successful completion of this internship? How will the internship make use of the specific skills and theories you have learned in class?

3. A brief, specific “contract” statement about the final paper you will write. (10 pages long, typed, 12-point font, double-spaced.)
Part Two
(To be completed by the student’s on-site Internship Supervisor)

On-site Supervisor (print name): ____________________________

Title: ____________________________________________________

Sponsoring business or organization: _________________________

Email: ___________________________ Phone: _____________________

Address: _________________________________________________

Internship Dates: From _____________ To ________________
Wages, Salary, Stipend (if applicable) ________________

Intern’s duties:
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

*Signature Of On-Site Supervisor ___________________________ Date ____________
(required)
Part Three
(Departmental Approvals)

*Approval, CMJ 495 Coordinator

______________________________Date ____________
(required)

*APPROVAL, CMJ Dept. Chair

______________________________Date ____________
(required)

__________________________________________
**CMJ 495: Supervisor’s Evaluation Form**

Department of Communication and Journalism  
University of Maine

Supervisors should complete this form and return it directly to:  
Dr. Sindhu Manjesh  
Internship Coordinator  
Department of Communication and Journalism  
5724 Dunn Hall, Orono, Maine 04469-5724  
email to sindhu.manjesh@maine.edu

Name of sponsoring organization:  

Supervisor’s Name:  
Title:  

Email address:  

Student Intern’s Name:  

Can you verify the number of hours completed? To the best of my knowledge, the above named Intern completed _____ hours this semester. (1 credit = 50 hours; 3 credits = 150 hours)

Please rate the performance of the intern in each of the following areas on a scale of 1-5, with five being high and one being low:

A. Dependability  
B. Attitude toward work and colleagues  
C. Initiative and independent thinking  
D. Professionalism in speech, dress, and conduct  
E. Responsiveness to direction, criticism, and orders  
F. Quality of performance and work produced  
G. Creativity in solving problems  
H. Competence in communication skills

Please give your overall impression of the intern in the space below. You may include as an attachment or attach another sheet of paper, if necessary. Your feedback is greatly appreciated!

Signature of Supervisor  
Date:  

Please check one:  
I would like this evaluation to remain confidential.  
I would like this evaluation to be shared with the Intern.