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For Fall Internship: Due August 15, 2016

For Spring Internship: Due December 15, 2016

For Summer Internship: Due April 30, 2017
Planned Parenthood of Southern New England began as the Connecticut Birth Control League in 1923 with the support of a dedicated group of volunteers, and that tradition continues to thrive today. There are many ways that you can help PPSNE. Please take a moment to read and complete this Internship Application. Let us know how you would like to learn and grow with PPSNE!

**OUR MISSION**

The mission of Planned Parenthood of Southern New England is to protect the fundamental right of all individuals to manage their own fertility and sexual health, and to ensure access to the services, education, and information to realize that right.

**OUR DIVERSITY**

Our clients, staff members and volunteers represent the wide diversity of Connecticut and Rhode Island. We are committed to creating an environment that is welcoming and inclusive, nurturing the qualities that enable volunteers to be productive, valued and vital members of our organization.

**OUR CORE VALUES**

- Quality..............................................in every part of everything we do.
- Partnership........................................working cooperatively as a team.
- Integrity...........................................the highest ethical and privacy standards.
- Communication..................................open lines and open doors.
- Customer Service...............................with excellence — every time.
INTERNSHIP POLICIES AND PROCEDURES

INTERN PROGRAM POLICY

CREDIT INTERNS MUST:

- Be enrolled at an accredited college with an intern program and have achieved at least junior status.
- Receive course credit.
- Have a letter from the college stating the class and number of units to be earned.
- Complete the Student Intern Agreement and Intern Information Sheet prior to the first day of the internship.
- Be at least 18 years of age.
- Receive no monetary compensation from PPSNE for the hours worked.
- Participate no more than 15 hours per week.
- Not exceed six months.
- Not participate under the supervision or in the same department of a family member.

REQUIREMENTS

- Students must complete at least 150 hours during the Fall and Spring semester and 120 hours during the Summer semester. The fall and spring semesters are 15-week sessions; the summer semester is a 12-week session.
- For each session, interns will work no more than 15 hours per week.
- A statement from the educational institution and advisor verifying credit will be awarded upon successful completion of the program.

PROCEDURE

Prior to the intern’s first day, the New Haven Administrative Office must receive a copy of the following:

1. The Student Intern Agreement.
2. The Intern Information Sheet.
3. A letter from the college stating the class and number of units to be earned.

The Administrative Office will submit new hire paperwork and termination paperwork for all interns as they would with every other Temporary, part-time employee.

EXPECTATIONS

- Demonstrate professionalism in communication, public relations, personal presentation, punctuality and attendance.
- Demonstrate initiative and willingness to develop new and useful skills, and enthusiasm in the performance of all tasks.
- Complete a semester project that will demonstrate knowledge of the semester’s work.

TO APPLY

Submit cover letter, resume, and complete application, including credit verification statement. We will call to confirm an interview upon receipt of all materials.

Send materials to: Suzette Hull, Planned Parenthood of Southern New England, 345 Whitney Avenue, New Haven, CT 06511; or fax (203) 907-2001; or email Suzette.Hull@ppsne.org.
INTERNSHIP APPLICATION

First Name: ___________________________ Mi: _____ Last Name: ___________________________ Date: __________________

Address: __________________________________ City: __________ State: _____ Zip: _______________________

If less than one year at above address, please indicate your previous address:

____________________________________________________________________________________________________

Phone: (School) ______________________ (Home) ______________________ (Cell) ______________________

Email: _____________________________________________________________________________________________

Social Security Number*: ________________________________

*To learn why this is needed, see CERTIFICATIONS & AGREEMENTS page.

Desired Placement: ________________________________

Dates of Participation: Start ________________________ End ________________________

Indicate Schedule Availability: Thursday: ________________________

Monday: ________________________

Tuesday: ________________________

Wednesday: ________________________

Total Hours/Week: ________________________

Friday: ________________________

Saturday: ________________________

Give a brief statement of your ultimate career objective:

____________________________________________________________________________________________________

____________________________________________________________________________________________________

Will you receive educational credit for the internship? Yes _____ No _____

Faculty Advisor/Recommendation/Credit Verification Statement:

____________________________________________________________________________________________________

____________________________________________________________________________________________________

Special Requirements (i.e. faculty visits, student reports, supervisor evaluation)

____________________________________________________________________________________________________

____________________________________________________________________________________________________

____________________________________________________________________________________________________

Faculty Advisor: _____________________________________________________________________________________

Address: __________________________________________________________________________________________

Phone & Email: _____________________________________________________________________________________

Print name, Sign and Date:

Applicant: _______________________________________________________________________________________

Faculty Advisor: ___________________________________________________________________________________
INTERNSHIP GOALS

Give a detailed statement of your ultimate internship objective. What would you like to get out of this internship? What do you want to learn? Please be specific. You may add an attachment.

Internship Position: ____________________________

Statement: ____________________________

________________________________________________________________________

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________________________________________________________________________
CERTIFICATIONS AND AGREEMENTS

- The information provided within this application and any attachments will be used to consider my qualifications to provide voluntary, unpaid services to Planned Parenthood of Southern New England, Inc. (PPSNE). I understand that completing this application does not guarantee that I will be offered a voluntary position with PPSNE.

- I hereby authorize Planned Parenthood of Southern New England, its subsidiaries and affiliates, employees and authorized representatives, to make inquiry of and request information from any individuals, present and former employers or volunteer supervisors, schools and colleges, credit institutions, criminal investigation bureaus, professional licensing organizations, and any of the entities that may possess information concerning me or that may be custodians of records relating to me. I also authorize the above-subscribed sources to release all information requested, and I hereby release those sources from any liability for doing so.

- I understand that with regard to investigative consumer credit reports, I have the right within a reasonable period of time, to request in writing the nature and scope of the investigation requested by PPSNE or its agents, along with a written summary of my rights under the Fair Credit Reporting Act.

- I certify that all statements made by me on this application and all related application documents are true, complete and correct to the best of my knowledge. I understand that any misleading or incorrect statements may be cause for denial or ending of my internship services and that PPSNE shall not be liable in any respect if my internship services are denied or ended because of false, misleading, or incorrect statements, answers, or omissions made by me on this application.

- I hereby release Planned Parenthood of Southern New England, Inc., its agents and representatives, from any and all claims related to the receipt or use of information in regard to my internship application.

- In the event that I enter into an internship service agreement with Planned Parenthood of Southern New England, I agree to comply with all its rules, regulations and directives. I understand that my internship services are for no stated term and are subject to the provisions within the PPSNE Internship Handbook.

APPLICANT PRINTED NAME: ____________________________________________

APPLICANT SIGNATURE: ___________________________________ DATE: ________________

All qualified candidates will be considered for internship services without regard to race, creed, color, national origin, ancestry, sex, age, marital status, sexual orientation, veteran status or disability.

Please return this completed application to:

Planned Parenthood of Southern New England
Attn: Suzette Hull
345 Whitney Avenue
New Haven, CT 06511

or

interns@ppsne.org
(203) 865-5158

CONNECT WITH US

ppsne.org

Revised November 2015
DEPARTMENTAL INTERN RESPONSIBILITIES

The PLANNED PARENTHOOD OF SOUTHERN NEW ENGLAND Internship Program offers unique opportunities to gain in-depth experience in a professional and diverse environment.

We offer internships in the following areas:

(1) HELP DESK/LAN SUPPORT INTERN

DEPARTMENT: INFORMATION TECHNOLOGY (IT)

The Help Desk/LAN Support Intern will have the responsibility of assisting users on various hardware and software related issues. This position will also provide support to all employees. The ability to be a team player, great comprehensive skills and professionalism are required.

THE ESSENTIAL JOB FUNCTIONS OF A HELP DESK/LAN SUPPORT INTERN ARE:

- Identify, research and resolve technical problems
- Respond to telephone calls, instant messages, email and personnel requests for technical support
- Document, track, and monitor all problems to ensure a timely resolution
- Support, monitor, test, and troubleshoot hardware and software problems pertaining to LAN
- Recommend and schedule repairs, via vendors or hands-on
- Install and configure workstations based on company needs and requirements
- Provide end users support for all LAN-based applications
- Assist with data recovery, using digital backup and/or recovery tools
- Perform other duties or special projects as requested related to area of responsibility

THIS POSITION WILL BE LOCATED AT:

PPSNE Administrative Office
345 Whitney Avenue
New Haven, CT 06511
DEPARTMENTAL INTERN RESPONSIBILITIES CONT.

(2) SOCIAL MEDIA & COMMUNITY RELATIONS INTERN  DEPARTMENT: PUBLIC RELATIONS & MARKETING (PR&M)

The Social Media & Community Relations Intern will take a lead role in organizing and analyzing PPSNE social media analytics. She/he will work closely with the PPSNE Social Media & Community Relations Coordinator to learn and apply analytic skills to social media data to enhance the agency’s online relationships and activities. The intern will learn to record and analyze social media analytics; measure and assess the effectiveness of different forms of online advertising; and learn to evaluate online engagement through social media channels. In addition, the intern will participate in local community events that may occur after hours and/or on weekends.

THE ESSENTIAL JOB FUNCTIONS OF A SOCIAL MEDIA & COMMUNITY RELATIONS INTERN ARE:

- Collect, collate and deliver analytics data
- Stay up-to-date on analytics services, trends and best practices
- Research and recommend enhancements to PPSNE data tracking and reporting systems and procedures
- Research and report on industry best practices for analytics, including Key Performance Indicators, conversion tracking and acquisition models
- Participate in team analysis of analytics data
- Participate in local community events

THIS POSITION WILL BE LOCATED AT:

PPSNE Administrative Office - RI
111 Point Street
Providence, RI 02903
The Study Coordinator Intern will do required trainings in human subject protection and handling of hazardous materials, and any others that may apply. Under the direction of the Director of Clinical Research (DCR), she/he will work on recruitment and enrolling of patients in clinical trials, preparation of study-specific materials, submission of Institutional Review Board (IRB) applications, internal monitoring of clinical study documents, preparation of spreadsheets and submission of study invoices.

THE ESSENTIAL JOB FUNCTIONS OF A STUDY COORDINATOR INTERN ARE:

- Work on updates for research staff for the aforementioned research training and update resumes and licensure as needed
- Spend time in health centers to become familiar with the clinic work of clinic assistants in order to facilitate work as research assistant
- Work with clinic staff on subject enrollment in research studies as needed and per training
- Work with Clinical Services & Research Coordinator on all administrative functions to support research and clinical services, including research payments to subjects and maintenance of logs
- Work with Director of Clinical Research (DCR) to submit Institutional Review Board (IRB) applications for new projects
- Work with DCR to update research to Planned Parenthood of Southern New England internal intranet
- Work with DCR on clinical summaries and scanning documents into Electronic Health Records for special services patients (for example, hormones for transgender care)
- Work on development of resource list for transgender social service & health care services
- Work with DCR on business plan to attract and secure new studies
- Develop and maintain data entry systems for data capture from study Source Documents
- Develop Excel spreadsheets for new and ongoing studies and submit invoices for payment as directed
- Work with other members of Clinical Services and other agency personnel on projects of mutual benefit that fit within curricular guidelines (for example, attendance at health fairs to discuss reproductive health, participate in presentations to school audiences, production of materials to be incorporated into brochures and patient education materials, assistance with manuals, etc.)

THIS POSITION WILL BE LOCATED AT:

PPSNE Health Centers in Connecticut and Rhode Island

Will also require travel to Administrative Office in New Haven, CT for training
(4) NEWS DESK INTERN

DEPARTMENT: OFFICE OF THE PRESIDENT (OOP)

The News Desk Intern will assist with researching and writing news stories for the Planned Parenthood of Southern New England internal intranet. This is an excellent opportunity for candidates who have an interest in the communications field. It is also an excellent opportunity to learn about the different aspects of the work of PPSNE.

THE ESSENTIAL JOB FUNCTIONS OF A NEWS DESK INTERN ARE:

- Assist with the development of a news schedule for the PPSNE internal intranet
- Interview PPSNE staff and volunteers about their work
- Draft stories that will be posted on the PPSNE internal intranet
- Collect and edit photos that will be posted along with news stories on the intranet
- Assist as needed with other internal communications projects

THIS POSITION WILL BE LOCATED AT:

PPSNE Administrative Office
345 Whitney Avenue
New Haven, CT 06511
DEPARTMENTAL INTERN RESPONSIBILITIES CONT.

(5) PUBLIC GRANTS & FINANCIAL ANALYSIS INTERN

DEPARTMENT: FINANCIAL REPORTING

The Public Grants & Financial Analysis Intern will assist the grants management and revenue analysis team with daily and ongoing projects. The position includes administrative duties, preparing spreadsheets, proofreading documents and assisting management with reports and projects. Outgoing, professional attitude, as well as familiarity with Microsoft Excel, Word and PowerPoint, are required.

THE ESSENTIAL JOB FUNCTIONS OF A PUBLIC GRANTS & FINANCIAL ANALYSIS INTERN ARE:

- Assist in the preparation of quarterly grant reports and data reports for staff use
- Assist in distribution of delegate contracts and reports
- Assist in assembly of safe sex kits, as needed
- Conduct internet search and research, as needed
- Assist Manager of Revenue Analysis and Grants Associate with duties as deemed necessary
- Semester project: develop a presentation on one or more outcome measures using aggregate patient data

THIS POSITION WILL BE LOCATED AT:

PPSNE Administrative Office
345 Whitney Avenue
New Haven, CT 06511
INTERN INFORMATION SHEET

PERSONAL INFORMATION
Name: ____________________________________________
Address: _________________________________________
Home Phone: __________________________ Email: __________________________

SCHOOL INFORMATION
School Attending: __________________________________
Anticipated Date of Graduation: _______________________
Class Attending for Credit: ___________________________

INTERNSHIP INFORMATION
Department: _______________________________________
Supervisor: _______________________________________
Location: _________________________________________
Phone: ___________________________________________
Dates of Participation: Start ___________ End ___________

EMERGENCY CONTACT
Emergency Contact Full Name: _______________________
Relationship: _____________________________________
Address: _________________________________________
Phone: (Day) ______________________ (Eve.) ____________ (Cell) ______________


SCHEDULES AND PARTICIPATION AGREEMENT

Please complete this form and return no later than ___________________________.
Any student who has not returned this form by the deadline will be unable to continue the program.

Name: ________________________________________________________________

Department: ___________________________________________________________

DATES OF PARTICIPATION: START __________ END __________

SCHEDULE

Monday: ____________________________ Thursday: ____________________________
Tuesday: ____________________________ Friday: _____________________________
Wednesday: ____________________________ Saturday: _________________________

Total Hours/Week: ____________________________

APPROVED BY:

Supervisor Printed Name: ________________________________________________

Supervisor Signature __________________________________ Date: ______________

“I hereby acknowledge and agree that I am participating in a student intern program through ____________________________ (Name of school) at Planned Parenthood of Southern New England for which I will receive school credits. I further acknowledge and agree that I will receive no monetary compensation for the time spent at Planned Parenthood of Southern New England.”

Intern Printed Name: _________________________________________________

Intern Signature ___________________________________ Date: ______________
In consideration of Planned Parenthood of Southern New England (PPSNE) allowing me to participate in its Student Intern Program (at my request), which participation will commence _________________ and end _________________, I understand and agree to the following:

1. I am enrolled as a student at ________________________________ (the “College”), which has a student intern program.
2. I am not being monetarily compensated for my intern work for PPSNE.
3. I am eligible to earn course credit from the College for participating in the PPSNE Student Intern Program.
4. I have presented to PPSNE a letter from the College stating the type and number of course credits to be earned.
5. The PPSNE Student Intern Program is designed predominantly for the benefit of its participating students and consequently, my participation in such program is for the predominant purpose of furthering my education.
6. PPSNE will have no responsibility or obligation whatsoever in determining whether or not I receive course credits, but rather such determination will be made by the College.
7. PPSNE or I may cancel my participation immediately in such program with or without reason at any time upon notice to the other. I also will notify the College of any such cancellation.
8. I will not be entitled to receive employment or an offer of employment strictly by virtue of participating in the PPSNE Student Intern Program.
9. I release and discharge PPSNE, its parent, subsidiary and affiliated organizations, and each of their directors, officers, employees and agents, of and from all liabilities, claims, demands, actions and causes of action of any kind arising out of or relating to all losses, damages or injuries of any kind sustained or incurred by me during my participation in the PPSNE Student Intern Program.

Intern Printed Name

Intern Signature ____________________ Date: ____________________
MID-TERM EVALUATION

(Your Name) ..................................................................................................................

(Department) ..................................................................................................................

Please take a moment to assess your intern assignment here at Planned Parenthood of Southern New England.

Were you familiar with responsibilities and objectives of the department prior to placement?
Yes _______ No _______

Are your assignments:
_____ What you expected
_____ Beyond your expectations
_____ Below your expectations

Would you say your responsibilities:
_____ Are challenging
_____ Are helping to develop new skills
_____ Reinforce educational knowledge

Do you require more direction/guidance from your departmental supervisor in order to have a better understanding of your responsibilities?
Yes _______ No _______

Do you find PPSNE staff encouraging/helpful?
Yes _______ No _______

Describe a typical assignment:
........................................................................................................................................
........................................................................................................................................

Now that you have experienced PPSNE day-to-day activities, what would you like to make sure you do before you complete your internship?
........................................................................................................................................
........................................................................................................................................
........................................................................................................................................

If you have additional comments, please write them freely.
........................................................................................................................................
........................................................................................................................................
........................................................................................................................................

NOTE:
RETURN THIS FORM BY __________. If you would like to discuss your assignment in more detail, do not hesitate to contact Suzette Hull at (203) 865-5158.

PLEASE BE ADVISED THAT THE INTERN SEMESTER CONTINUES UNTIL __________. ANY INTERN WHO HAS ARRANGED WITH THEIR DEPARTMENTAL SUPERVISOR TO END THE SESSION EARLY, SHOULD NOTIFY SUZETTE HULL AT LEAST TWO WEEKS PRIOR TO THE END OF THE SESSION.

You will meet briefly with a member of the Management Team on __________ to discuss your intern experience and career objectives.
Management Team Member: ___________________________ Title: ___________________________