

PRE-INTERNSHIP TO-DO CHECKLIST

****This document is for you the student's use only and you are responsible for keeping up with completing all pre-internship tasks and submitting all required paperwork. DO NOT turn this document in to the *KHS Internship Coordinator* with the other required documents. ****

- _____ **E-mail Dr. Hebert** (ehbert@selu.edu) to inform that you will be interning and graduating.
- _____ **Internship application** completed and submitted.
- _____ **Affiliation agreement** with site is completed. The *KHS Internship Coordinator* can verify this.
- _____ **Physical exam** completed (within the past year before the internship semester) and form(s) submitted. If serious medical condition exists, written indication of treatment, and/or medical clearance to participate if required.
- _____ Must obtain and submit a **copy of your immunization records**. These records must indicate all immunizations that have been completed, and specifically include: *MMR vaccination* (2 doses), *varicella history* (*vaccination or contraindication*), *Hepatitis B vaccination* (3 doses). *****Varicella contraindication* implies that you had the chickpox; if this contraindication is not indicated on the immunization records and you did have the chickpox, then documentation from a physician indicating chickpox history needs to be obtained. Otherwise, it is required that you have the varicella vaccination or a varicella titer performed. If you *have never had the chickpox*, then again you are required to have the varicella vaccination or a varicella titer performed. For *MMR vaccination history*, if this vaccination has not been completed (both doses) it is required that a MMR titer be performed. For *Hepatitis B vaccination history*, if this is not fully completed (all 3 doses) prior to the internship semester, then the internship site needs to communicate to the *KHS Internship Coordinator* whether they require ("Yes" or "No") the *Hepatitis B vaccination*. If the internship site communicates "No", then a "Hepatitis B Waiver" must be signed and submitted – this waiver can be obtained from the *KHS Internship Coordinator*. If the internship site communicates "Yes", then a Hepatitis B titer must be performed. ****
- _____ **Negative TB skin test** (*completed within the past year*) and submit documentation of proof of results. ****Sports Management students are not required to have this unless their internship site indicates so. ****
- _____ **Copy of CPR certification** (not to expire prior to the end of the internship semester) is submitted. ****Must be an *American Heart Association (AHA)* or *American Red Cross (ARC)* certification, which included a practical skills component. Online-only certifications WILL NOT be accepted. ****
- _____ **Health insurance verification** (signed form and photocopy of insurance card/document) is submitted. ****If you do not have health insurance, then just "check" next to the indication that says "I am aware of the risk stated above and choose to purchase no insurance coverage."****
- _____ Complete and submit **confidentiality agreement**.
- _____ Sign and submit the **criminal background check release form** and submit **criminal background check** request via the online vendor required by the *KHS Department*, or verification from the internship site indicating the site performed this task and you were cleared.