



**STATE UNIVERSITY OF NEW YORK
COLLEGE OF TECHNOLOGY
CANTON, NEW YORK**

COURSE OUTLINE

AGMT 410 AGRIBUSINESS MANAGEMENT INTERNSHIP

PREPARED BY: William T. Jones

SCHOOL OF BUSINESS AND LIBERAL ARTS

MAY 2016

AGMT 410 AGRIBUSINESS MANAGEMENT INTERNSHIP

- A. TITLE: Agribusiness Management Internship
- B. COURSE NUMBER/SHORT TITLE: AGMT 410/Internship
- C. CREDIT HOURS: 6-12
- D. WRITING INTENSIVE COURSE: NO
- E. COURSE LENGTH: 15 WEEKS
- F. SEMESTER(S) OFFERED: Spring
- G. HOURS OF INTERNSHIP; LECTURE; SEMINAR ACIVITY: 40 hours per credit
- H. CATALOG DESCRIPTION: The Agribusiness Management Internship integrates classroom work and practical experience with cooperating businesses or agencies. The Internship allows seniors the opportunity to apply classroom learning in an agricultural management setting. It is a structured field experience in which an Intern, under the guidance of a supervisor, acquires and applies knowledge and skills while working in a responsible role. The internship site and completed documentation must be completed by the student and turned into the supervising faculty by the end of the semester prior to the start of the internship. Internship assignments and activities may include, but not be limited to, information gathering, research, drafting of documents, office management, and other tasks and responsibilities deemed necessary.
- I. PREREQUISITES: Senior status in the Agribusiness Management program. Student must have a GPA of 3.0 or higher before the internship begins, or permission of the instructor in consultation with the student's academic advisor.
- J. STUDENT LEARNING OUTCOMES:
Upon successful completion of the Internship, the student will be able to:

<i>Course Objective</i>	<i>Institutional SLO</i>
a. Identify and explain discipline specific knowledge and skills required for success in an agricultural management setting.	2. Crit. Thinking 3. Prof. Competence
b. Operate and/or use specialized equipment, software and tools required within the environment.	2. Crit. Thinking 3. Prof. Competence
c. Draft and revise documents used in various applications in the Agribusiness Management settings.	2. Crit. Thinking 3. Prof. Competence
d. Perform office management tasks as needed within the environment.	2. Crit. Thinking 3. Prof. Competence

e. Identify how the organization uses technology to create a positive work environment and to handle conflicts.	2. Crit. Thinking 3. Prof. Competence
f. Develop a plan to accomplish performance needs, supervision plan, and rewards.	2. Crit. Thinking 3. Prof. Competence
g. Collaborate with others to accomplish specific goals in the agribusiness management environment.	2. Crit. Thinking 3. Prof. Competence

K. TEXTBOOK: Optional; some texts may be specific to and be required for the internship by the sponsoring organization.

L. REFERENCES: None

M. EQUIPMENT: Any that may be specifically required by the internship sponsor in addition to SUNY Canton's e-mail address and access to internet service that are appropriate for communication and progress reporting on internship experience; word processing for journal and portfolio of internship experience.

N. GRADING METHOD: (A-F)

O. MEASUREMENT CRITERIA: Journal, Field Assessment, Final Report, and Portfolio.

P. DETAILED TOPICAL OUTLINE:

- I. Journal (Progress Report)
 - A. Daily hours worked
 - B. Weekly activities
 - C. Responsibilities and assignments experienced
- II. Portfolio and Report
 - D. Internship assignments
 - E. Relevant exhibits and illustrations
 - F. Observations and report summarizing internship experience
- III. Internship Evaluation
 - G. Progress updates
 - H. Field Assessment:
 1. Professional skills
 2. Field skills
- IV. Seminar
 - I. Oral presentation
 - J. Audience, program director, and participant questions and answers.

AGMT 410 AGRIBUSINESS MANAGEMENT INTERNSHIP
SUPERVISOR'S EVALUATION OF INTERN'S PERFORMANCE

Intern Supervisor: Please complete and return this form to the Program Director, Agribusiness Management Internship by mail or fax—this form must not be hand carried by the student.

Student Name:

Supervisor's Name:

Supervisor's Title:

Phone:

Fax:

Name of Company:

Address of Company:

1. How prepared was the student for your internship needs (knowledge in specific areas)? Please suggest additional knowledge or abilities that you would have liked the intern to have.
2. Please evaluate the student's written and oral communications used in this internship.
3. How did the student fit into or adapt to your working environment? (For example, consider such matters as attitude, dress, punctuality, reliability, knowledge of culture, and courtesy).
4. What benefits did you and your company receive by providing an internship experience for this student?
5. How well did the student accomplish the learning objectives from this experience?
6. Please give a brief evaluation of the student's overall performance. To what degree was the student effective and efficient in the performance of his or her duties (for instance, did the intern make good use of his/her time with you)?
7. If you have any suggestions for changes in the curriculum or the internship process, please note them below and feel free to telephone to discuss your ideas.
8. Would you want to have another intern work with your organization?

___ yes ___ no

___ maybe, depending on (please explain if not obvious from your responses to the previous questions):

Supervisor's Signature / Date

Return this form (mail or fax) to: Program Director, Agribusiness Management Internship, School of Business and Liberal Arts, SUNY Canton, College of Technology, 34 Cornell Drive, Canton, NY 13617 Fax: (315) 386 - 7933

**AGMT 410 AGRIBUSINESS MANAGEMENT INTERNSHIP
STUDENT FINAL REPORT**

Student Intern: Please complete and return this form to the Program Director by mail or fax. See the back of this form for mailing address.

Student's Name: _____

Supervisor's Name Phone: _____

Supervisor's Title: _____

Name of Company: _____

Address of Company: _____

City _____ State _____ Zip Code _____

WRITE A SHORT PARAGRAPH ON THE FOLLOWING:

1. Overview:

Describe the internship in general terms. State the mission of the business or agency where you worked. Describe how the department or function you worked in fits into the business or agency as a whole. State the average number of hours worked each week and the overall duration of the internship.

2. Tasks Worked On:

Describe the work activities, the final product, and responsibilities assumed by you. Tasks should be described in terms that will permit the internship director to understand how the work relates to professional practices.

3. Relation to Theory:

Relate how work tasks fit in with theory as presented in classes, in textbooks, and by professors. In most companies, actual practices depart somewhat from methods taught in school. Describe how the company's methods agree or disagree with what you learned in class.

4. Evaluation:

Provide your own evaluation of the internship. Was it intellectually challenging? Were you allowed to use your own initiative? Would you recommend a similar internship for another student? How did it affect your career goals?

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STATEMENT OF OBJECTIVES

This statement of objectives is to be completed by the student intern and the student's Program Director for the planned internship. Each party is to sign this form and the student is to return it to the Program Director.

Student Intern's

Name: _____

Semester: _____

Agribusiness Management Courses Completed to Date: _____

Agribusiness Management Courses Currently Taking: _____

Emphasis or Career

Objective: _____

Supervisor's name:

Organization's

Name: _____

LEARNING OBJECTIVE

is: _____

The specific activities that the intern will undertake to accomplish this objective are:

LEARNING OBJECTIVE

is: _____

The specific activities that the intern will undertake to accomplish this objective are:

LEARNING OBJECTIVE

is: _____

The specific activities that the intern will undertake to accomplish this objective are:

If additional objectives are used, please outline them below or attach an additional page.

I agree that the objectives stated herein are reasonable, and I will attempt to accomplish them to the best of my ability through the activities suggested above.

STUDENT SIGNATURE
NUMBER

DATE

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PHONE

I agree that the learning objectives and activities stated above are realistic and I will provide training and assistance to the intern as needed to aid the student's accomplishment.

SUPERVISOR'S SIGNATURE

DATE