



Q1.
APPLIED PHYSIOLOGY AND KINESIOLOGY (APK)
INTERNSHIP SITE APPROVAL FORM

Q2.

The **Department of Applied Physiology and Kinesiology** (APK) at the University of Florida would like to thank you in advance for taking the time to complete the approval process and your willingness to provide valuable internship opportunities to our students. The Department of APK requires that all **undergraduates** complete a 12-credit internship experience in their final semester of study. The experience requires a minimum of 520 clock hours or 35-40 hours a week for 15 weeks, for the Fall and Spring semesters, or 40-45 hours a week for 13 weeks during the Summer semester. **Graduate** students in the Human Performance concentration may elect to complete between 3 - 9 credits of internship to count towards their degree. Each registered credit of graduate internship requires a minimum of 48 clock hours be completed and a graduate student must register for at least 3 credits in any semester they intend to complete an internship. Therefore, a graduate student will be required to complete between 144 - 432 hours during their internship. Ideally, interns become exposed to the tasks that will be required of them as professionals in the field, as well as receive opportunities to develop their skills and areas of interest. A brief description of our undergradaute and graduate programs is below:

**APK Undergraduate Program**: Prepares students to function as an exercise technician, exercise specialist, and/or wellness instructor in hospital, corporate, private, or governmental agency, to pursue graduate study in kinesiology, OR to pursue graduate study in a health profession requiring education beyond an undergraduate degree. The curriculum provides a strong basic science background and requires additional course work in the biological aspects of exercise. Students may pursue internship opportunities in healthcare, research, fitness, or other areas of human performance.

**Human Performance (Graduate)**: The Human Performance concentration is a non-thesis program leading to a Master of Science degree in Applied Physiology and Kinesiology. Its purpose is to train students for careers where they can promote scientifically based exercise, wellness, and psychological factors to enhance health, athletic development and/or movement performance. Furthermore, students may be trained to be an integral part of the health care team that administers, assesses, and develops programs for clinical populations.

Please review the <u>APK Internship Policies and Procedures</u> Document to gain a better understanding of the expectations of students and site supervisors during the experience. Note that clicking the link to the Policies

Q5. Organization Name
Orlando Health
Q6. Organization Location(s) - Include Addresses Of All Locations To Be Included As Part Of This Approval
60 Columbia St. Orlando, FL 32806
Q10. URL of Website For Organization
https://www.orlandohealth.com/services-and-specialties/orlando-health-jewett-orthopedic-institute? utm_source=google&utm_medium=paid%20search&utm_campaign=%5BPaid%20Search%5D%20Jewett%20Orthopedic%20Institute%20-
%20Brand%20- %205969&utm_content=Jewett%20Ortho&utm_term=b_jewett%20orthopedic&utm_id=14803112116&gclid=CjwKCAjwoa2xBhACEiwA1sb1BC5U5ZQtaXMhMNY_1_BNsyfHBJ3aRTkVD9leMGjjb9dRAua5qr4RoC24wQAvD_BwE
[
Q7. Name of Individual Who Will Receive Applications From Students
Neal Stepl
Q8. Email Address of Individual Who Will Receive Applications From Students
Neal.stepp@orlandohealth.com
Q9. Phone Number of Individual Who Will Receive Applications From Students
3174107152
Q34. Will the person receiving internship applications from students be the same person supervising the
student and completing the student evaluations during the internship?

YesNo

and Procedures manual will take you away from this survey and cause any information input into the survey to be lost.

Evaluations	
Joesph (Joe) Morton	
Q12. Email Address of Individual Who Wi	ill Supervise Students Directly During Internship and Complete
Joseph.morton@orlandohealth.com	
Q13. Phone number of Individual Who W Student Evaluations	ill Supervise Students Directly During Internship and Complete
407-2760362	
Q14. What Semester(s) Is Your Organiza  ☐ Fall (August - December)  ☐ Spring (January - April)  ☑ Summer (May - August)	ition Available To Accept Interns? (select all that apply)
This means that site supervisors of under	a site supervisor hold one degree higher than the student intern. rgraduate interns must hold at least a bachelor's degree and those of ster's degree. Based on this policy, for which category of students is ations? Check all that apply
✓ Undergraduate Students	Graduate Students
Q16. How many interns is your organizat	ion willing and able to support per semester?

Q11. Name of Individual Who Will Supervise Students Directly During Internship and Complete Student

Q35. APK Undergraduate students are permitted to complete a single 12-credit (520 hour minimum) internship in a single semester or two, 6-credit (260 hour minimum) internships over two semesters. Are you willing and able to provide a part-time internship experience (~20 hours per week), full-time (~40 hours per week), or either to our undergraduate students depending on the student's internship plans?

Full-Time Internship (~40 hours per week)
Either Part-Time or Full-Time depending on the student's internship plan
Q17. Describe the normal working hours anticipated for an intern at your organization. Please indicate ikelihood and circumstances surrounding any evening or weekend time commitments.
8am-5pm- normal working hours 5pm-9pm- practice coverage hours
Q18. Does your organization offer non-paid or paid internships?
<ul><li>Non-paid</li><li>Paid (amount)</li></ul>
Q21. List other benefits your organization offers interns (i.e. housing, health insurance, travel reimbursement, etc.)
N/A
Q22. List required purchases for interning with your organization (i.e. parking pass, uniform, I.D. Badge, etc.)
Background check, vaccinations
Q23. List required skills or previous experience necessary for interning with your organization
NA NA

O Part-Time Internship (~20 hours per week)

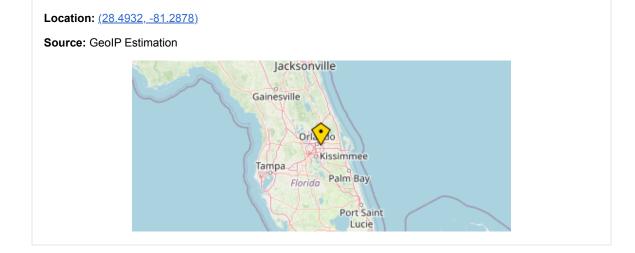
background check)	
NA	
Q25. Provide a bulleted list of duties/responsibilities you	ur organization expects to be fulfilled by interns:
- observe full time staff and participate when appropriate - ask question internship and get out of it what the intern puts into it.	ns that lead to a better understanding of the profession - take responsibility of the
Q26. Please describe a typical day for the intern:	
	Orlando City Soccer Academy. The intern will participate in practice coverage as I as a full time employee and be invited to all meetings/educational opportunities
Q28. All Interns (undergraduate and graduate) MUST b Learning Outcomes (SLO's), though evaluation of all 9 the duties/responsibilities provided to interns at your org  Integrate principles and methods of math, social sciences, and/or arts and humanities to applied physiology and kinesiology, health, wellness, and/or fitness environments.	is preferred. Please check each SLO that applies to
Identify and relate the nomenclature, structures, and locations of components of human anatomy to health, disease, and physical activity.	Solve applied physiology and kinesiology problems from personal, scholarly, and professional perspectives using fundamental concepts of health and exercise, scientific inquiry, and analytical, critical, and creative thinking.
Identify, examine, and explain physiological mechanisms of homeostasis at various levels of an organism (i.e., cells, tissues, organs, systems).	Collect, compare, and interpret qualitative or quantitative data in an applied physiology and kinesiology context.
Investigate and explain the effects of physical activity on  ✓ psychological health as well as the perspectives used to enhance adherence to healthier lifestyles.	Effectively employ written, oral, visual, and electronic communication techniques to foster inquiry, collaboration, and engagement among applied physiology and kinesiology peers and professionals as well as with patients, clients, and/or subjects.
Identify and explain the acute and chronic anatomical and physiological adaptations to exercise, training, and physical activity.	

Q24. List any special credentials or documents required to intern with your organization (i.e. CPR/First Aid, Liability Insurance, Personal Training Certification, OSHA training, HIPPA training, Pre-Internship orientation,

take you away from	n this survey and any i	nformation input into the	dures Manual? Note that e survey will be lost if you ng the link to open it in a	ou navigate back. We
<ul><li>Yes</li><li>No</li></ul>				
Q30. Signature of I	ndividual Who Will Be	Receiving Internship A	pplications	
<u>×</u>	In J	topp	clear	
Q31. Signature of I	ndividual Who Will Be	Supervising And Evalu	ating Students During T	<sup>-</sup> he Internship
×	Q Mo	ton	clear	
Location	n Data			

Q29. Would you like to be added to the Department's list of approved sites for future interns?

Yes  $\bigcirc \ \mathsf{No}$ 



Approved: 4.29.24

Blain Harrison

Blain Harrison - APK Internship Coordinator