Prospective Internship Site Profile Department of Health Education & Behavior

Location:	Gainesville		Florida	Date: <u>10/13/2020</u>	
Location	City		State	2	
Agency: _	Rural Women's Health Proje	ect, Inc.			
Contact: _	Fran Ricardo				
Address: ¹¹	108 S.W.2nd Ave.		Gainesville	Florida, 32601	
-	Street / PO Box		'"""City	State / Zip	
Phone:352-372-1095			Fax:		
Email: fricardo@rwhp.org			Website:		
What sem	esters is your agency availab	ble to accept inte	erns?		
x Fall ((August – December)	X Spring	(January – April)	X Summer (May – August	
Normal w	ork hours (Please indicate ar	ny evening or w	eekend time comm	nitments):	
Is office s	pace available to interns?	Yes	X _{No}	Not at this time, due to Covid-19 Comments	
Is a comp	puter available to interns? X Yes	X Yes	No	Yes, depending on the need.	
Ĩ				Comments	
Does your	agency offer paid or non-pa	id internships?	X Non-paid	Paid (amount):	
List other	benefits your agency offers	interns (i.e. hou	sing, health insura	nce, travel reimbursement, etc.)	

The RWHP does not offer housing or health insurance. If travel is part of a project, than certainly there is travel reimbursement.

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List required purchases for interning with your agency (i.e. parking pass, uniform, etc.)

There are no required items that need to be purchased for an internship with the RWHP.

List the required skills or previous experience necessary for interning with your agency.

Each intern will participate in an interview process to assess their "fit" to work with our non-profit. We expect that they have researched our organization and feel that they can bring something to it as well as gaining experience. The intern should be flexible, willing to adapt to the needs of the communities that we serve. We require that they have the initiative to work within the mission of our organization, that they come with a good attitude and desire to serve the community. We ask that they work well in a team setting as well ad independently.

Special Requirements (i.e. special application, proof of health insurance, immunization, etc.) *Please note: All interns are required to purchase professional liability coverage for \$1,000,000.*

We ask that all interns following our health protocol, based on the CDC guidelines.

Provide a comprehensive list of health education internship duties, which will be assigned to your HEB senior intern. Please indicate with NCHEC Responsibility/Responsibilities align with each duty.

As an organization that serves the needs of vulnerable communities, primarily the Spanishspeaking immigrant community and women living with HIV, each intern will work closely with the RWHP staff to develop a program that will offer them the opportunity to meet their required NCHEC responsibilities. The needs of the communities that we serve are ever-changing and we might be developing various types of health education materials /training materials that would enhance our outreach including brochures, videos, fotonovelas, magagazines and social media posts. We believe that in order for the intern to have a successful internship, they need to be involved in all aspects of the work the the RWHP performs, but also to have a specific project that they can create, develop and complete during their semester that will provide them with hands-on experience. Interns are considered part of the RWHP team and their input is valued.

List any important information about your agency.

I just want to reiterate again, that when we bring an intern into our agency, we want them to be part of our team, to be exposed to all of the facets of the organization and to be an integral part of the work that we do.

Would you like to be added to the Department's list of approved sites for future interns? X Yes No

FOR OFFICE USE ONLY:

Approval of Department Internship Coordinator: _______

Contract on File: