



Springfield-Greene County
Health Department
Helping people live longer, happier, healthier lives

Springfield-Greene County Health Department Intern Program

Primary Purpose:

The Springfield-Greene County Health Department (SGCHD) internship program is designed to offer college level students, both graduate and undergraduate, an opportunity to gain work experience in local government. Applications will be received through the Health Education Office and matched with specific internship opportunities in various programs throughout the Health Department.

The intern program offered by SGCHD

- Promotes collaboration with the academic community and an opportunity for students to receive valuable work experience in public health.
- Provides opportunities to network and meet many public health and community professionals.
- Provides programs with opportunities to screen for future employees.
- Enhances individual performance of students while providing valuable job skills.
- Encourages students to complete valuable work products and introduce new ideas to the Health Department.

Eligibility:

Any student wishing to be an intern with the Springfield-Greene County Health Department must be currently enrolled in an accredited college, university, community college, trade/vocational school, or business program leading to a degree, diploma, or certificate program. Some intern positions may require a specific degree program for eligibility.

All internships offered through the Springfield-Greene County Health Department will be filled after completing a competitive process. All applicants will have to provide the Health Department with the appropriate documentation (outlined in the Application Process) and complete an interview process. Positions will be filled based on the best applicant for the job.

Application Process:

To apply for an intern position with the Springfield-Greene County Health Department students must:

- Fill out an application
- Submit application, resume and cover letter to the Health Education Office. Cover letters should include a statement of intent including the specific position for which the intern is applying, description of related work/volunteer experience, and dates/times the student is available.
- If course credit for the internship is desired, a letter from the school indicating that internship credit is acceptable must be submitted with the application. This letter must include all necessary requirements including

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Springfield, MO 65802
Phone: (417) 864-1658
Fax: (417) 864-1099



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but not limited to the number of required hours, project requirements and/or any documentation the school requires of the Springfield-Greene County Health Department.

- The student may be asked to submit names and contact information of at least two references that can be contacted if needed.

Supervision:

Students completing their internship with the SGCHD will be under the direct supervision of the division for which he/she is doing the intern project. All interns will be hired and facilitated through the Health Education Office. The Health Education Office will support those supervisors who have interns in the Health Department as necessary.

Responsibilities:

Internships throughout the department will vary from division to division. The Health Department has a variety of programs and each student will have different duties and responsibilities, yet the following responsibilities apply to all interns.

- Work assignments will be related to the Health Department, and should be determined following careful consideration of the intern's skills, knowledge, and experience.
- Each division supervisor will develop a written description of the scope of work for each intern position, outlining specific duties and tasks. This should be done with the input of the Health Education Office.
- Supervisors and staff employing interns should monitor the student's assignments and time, while providing guidance and support to promote growth and performance.
- All interns will be treated as Health Department employees. They will be asked to adhere to all City of Springfield and Health Department Administrative Memorandums.

Intern Acceptance:

Internship candidates will apply for a specific intern position within the Health Department. These positions will be requested by a specific division through the Health Education Office and job descriptions will be sent out to all educational institutions in the area. The overseeing supervisor, in accordance with the Health Education Office, will conduct an interview and will rate all applicants the same way they would for a paid position. The Health Education Office will notify all applicants of acceptance or rejection. The Health Department reserves the right to reject an application due to criminal history, drug use, or what it views as an inappropriate/unsatisfactory application.

All interns must be willing to submit to a criminal background check, and must sign an agreement of confidentiality.



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Duration of Internship:

An internship may span one semester that runs concurrently with the intern's institution semester schedule. The Springfield-Greene County Health Department reserves the right to expand the duration of the internship based on the project at hand. He/she may be eligible to apply for another intern position within the Health Department if he/she wishes after the completion of one full semester of interning. Summer internships will also be accepted. A certification of completion will be awarded upon the successful completion of the intern program.

Termination of Internship:

If the intern's supervisor (or other administrative figure) finds fault with the intern, the internship can be terminated immediately and appropriate notification will be sent to the institution. The intern will be treated in the same manner as a paid staff position and will be held to the same standards and reprimanded in the same way.

Intern Project Material:

Any and all material generated by or through the intern is the property of the Springfield-Greene County Health Department. The intern may use the material for portfolio purposes, but the Health Department reserves the right to use any and all materials developed by the intern for the program even after the internship is over.

Intern Conduct:

All interns must follow the rules and policies of the City of Springfield and the Health Department at all times. Interns must conduct themselves in a professional manner and represent the Health Department and the City of Springfield appropriately.

Intern Pay:

Health Department internships are not paid unless otherwise stated in the job description.

Formal Internship Acceptance Agreement:

All interns must sign an Internship Agreement prior to the beginning of the project. This agreement between the intern and the Health Department outlines the internship as agreed to by both parties.



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Intern Acceptance Agreement

I, _____ give the Springfield-Greene County Health Department permission to inquire into my character references, licensures, and employment and/or volunteer history. I also give permission of any such holder to release that information to the SGCHD.

I hold SGCHD harmless of any liability, criminal or civil, which may arise as a result of the release of this information about me. I also hold harmless any individual or organization that provides information to the above named agency. I understand the SGCHD will use this information only as part of its verification of my internship application.

I understand and agree to all terms and limitations brought forth by the SGCHD. I understand that my internship can be terminated at any point and time with no prior notice.

I agree to abide by all policies and procedures outlined in the merit rules of the City of Springfield. I understand that the Health Department deals with confidential information and if I come in contact with that information, I will also keep it confidential. If I do not, I am willing to accept all responsibility and actions that come with that disclosure of information.

I hold SGCHD harmless of any liability that I might incur during the process of my duties. I understand that I am volunteering on my own behalf and agree to operate within the scope of my responsibilities, be properly licensed and certified by the appropriate agencies (if required), and will not be guilty of any willful or criminal misconduct, gross negligence or reckless misconduct in the course of my duties as an intern.

Name—please print

Social Security Number

Signature

Date

Witness

Date



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Internship Application

This form may be returned via mail, fax or e-mail

*Submit to the Springfield-Greene County Health Department – Health Education Office
227 E. Chestnut Expressway, Springfield, MO 65803 (417) 864-1099 (fax) rray@springfieldmo.gov (e-mail)*

Name (Please Print)

Address

Primary Telephone Number

City State Zip Code

Secondary Telephone Number

E-mail Address

Academic Institution

Degree program

Are you applying for this internship with the intention of receiving educational credit?
_____ Yes _____ No *If yes, please answer the following:*

Faculty Advisor:

Name

Phone Number

E-mail

Internship Contact:

Name

Phone Number

E-mail

Area(s) of Interest for Internship Project

Term and year you are applying for: Spring _____
Year

Summer _____
Year

Fall _____
Year

Undergraduate or Graduate Degree

Student Signature

Date



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Confidentiality of Records and Information

Employees, students, and/or interns at the Springfield-Greene County Health Department, in the performance of their duties or assignments, often have access to information and records that are confidential. It is the responsibility of supervisors and preceptors to provide employees, students and interns with instructions on maintaining security of records and releasing information and records; however, each employee, student, and/or intern is responsible for assuring confidentiality of information and records within his/her control and for releasing information only to authorized agencies or individuals. Questions regarding release of information should be referred to the employee's supervisor.

Employees, students, and/or interns revealing confidential information to unauthorized agencies or individuals are subject to disciplinary action and when in violation of the law, may be subject to fine and/or imprisonment.

An individual who terminates employment and/or services with the Springfield-Greene County Health Department is required to sign a statement certifying his knowledge of and agreement to comply with this policy. The statement will be filed with the employee's official personnel records.

I have read, understand and agree to comply with the provisions of this policy.

Date

Signature