

National Taipei University of Nursing and Health Sciences
Department of Leisure Industry and Health Promotion

Internship Learning Plan

Internship Portfolio			
Student Name		Student ID	
Internship Organization		Internship Department and Position Title	
Internship Semester	Academic Year: _____ Semester: _____	Internship Duration	From: _____ (Year/Month/Day) To: _____ (Year/Month/Day)
Faculty Advisor (University)		Industry Supervisor	
Internship Course Objectives	<p>Example provided below is subjected to change according to course objectives of “Practice in leisure, tourism and health promotion industries”/“Advanced Practice in leisure, tourism and health promotion industries”.</p> <ol style="list-style-type: none"> 1. To understand the work environment and organizational structure of travel industry. 2. To learn work flow and technical operations. 3. Develop business-planning capabilities for travel-industry professionals . 		
Faculty Advisor 's Supervision Plan			
<ol style="list-style-type: none"> 1. In accordance with the Ministry of Education’s regulations for off-campus internship courses, the Department has established a “Student Off-Campus Internship Learning Plan Form.” The initial draft of this form is completed during the “Workplace Ethics and Communication” course. During the internship period, the faculty internship advisor shall assist the student in revising the plan, in principle, by the fourth week of the internship. The revised plan shall serve as a basis for internship supervision and review. After being signed or officially endorsed by the organization’s mentor, the faculty advisor, and the student, the form shall be submitted to the Department Office. 2. Each internship shall include at least two on-site supervisory visit per semester. In the event of a change in internship organization, the frequency of supervision and on-site visits shall be increased as appropriate, based on actual circumstances. 3. Upon completion of each on-site visit, the faculty internship advisor shall complete and submit the “Off-Campus Internship Faculty Visit Record Form” and the “Off-Campus Internship Organization Evaluation Form.” 			

Internship Performance Evaluation and Feedback (Grade Evaluation)

<p>Internship Performance Evaluation Criteria and Weighting</p>	<ol style="list-style-type: none"> 1. Evaluation by the faculty advisor (including on-site visits and monthly return-to-school attendance at scheduled dates): 30% 2. Internship monthly journals (10%) 、 Interim report (10%) 、 Final report / Project report (10%) 、 Evaluation of internship plan (10%); Subtotal 40%. 3. Internship performance and attendance evaluation (assessed and submitted by the internship host organization at the end of the term).
<p>Internship Feedback from Students</p>	<p><u>Fall Semester:</u></p> <ol style="list-style-type: none"> 1. Students are required to submit a monthly internship journal. 2. Students are required to submit individual interim report and final internship self-reflection report. 3. Students must complete the internship evaluation questionnaires provided by the department during the internship. 4. Students are required to return to school on the designated date to present their interim internship reflection. <p><u>Spring Semester:</u></p> <ol style="list-style-type: none"> 1. Students are required to submit a monthly internship journal. 2. Students are required to submit individual interim report and group internship final report. 3. Students are required to return to school on the designated date to attend the Internship Outcome Presentation Session, as well as fill out the internship feedback questionnaire.

Staged Internship Learning Plan- 1st or 2nd semester

Detailed Plan and Timeline for Each Stage of the Internship (Add rows as needed)							
Period (Suggested: 4 weeks per phase)	Learning Objectives (Theme)			Specific Tasks at Internship (in bullet points)			
Week ___ to Week ___	<u>Example:</u> Food & Beverage Service Practice			Be familiar with job responsibilities and attend employee training sessions.			
Week ___ to Week ___				<u>Example:</u> 1. Clean and organize guest rooms. 2. Complete daily work reports. 3. Fill out maintenance request forms. 4. Be familiar with guest preferences and report to the supervisor. 5. Track and report loss or damage of amenities and consumables 6. Participate in company training programs.			
Please evaluate how each phase of the internship corresponds to the department's core competencies (Total: 100%)							
	Competence in leisure and recreation planning and Communication	Capability in delivering health promotion services	Capability in managing health crises in leisure and tourism	Competence in applying technology in leisure and tourism	Competence in leisure-health literacy and global engagement	Competence in social responsibility and professional ethics	Self-directed learning
Relevance	___ %	___ %	___ %	___ %	___ %	___ %	___ %
Internship Evaluation	___ %	___ %	___ %	___ %	___ %	___ %	___ %
Performance Achievement	% (Graded by both the intern and the faculty advisor)						

Internship Guidance and Resources Provided by the Organization

● The Organization's Overall Training Plan for Interns

- Basic Knowledge Industry Knowledge Industry Culture Occupational Safety and Health Other : _____
- Hands-on practice Product knowledge Problem-solving skill Service Skills
- Practical Problem Analysis General Administrative Management Communication and Coordination Other :

● Provision of Resources and Equipment by the Organization

- Pre-placement Training One-on-One Instruction Equipment Training
- Other : _____

Based on the items selected above, please list and describe the training provided and the resources invested:

Internship Curriculum Planning by the Organization's Mentor

● Guidance Provided by the Organization's Mentor:

- Form Preparation Service Skill Equipment Operation System Operation (e.g., hotel management information systems, ticketing systems, etc.)
- Communication and Coordination Purchasing or Inventory Preparation
- Other (Please Specify) : _____

● Guidance Methods Provided by the Organization's Mentor:

- Verbal Briefing Demonstration Case-Based Discussion Other : _____

Organization Advisor Signature:

Faculty Advisor Signature:

Intern's Signature: