



**TU SPORT MANAGEMENT INTERNSHIP PROGRAM  
KNES 445 REGISTRATION FORM**

Please type or print legibly. This form should be completed by the student then reviewed, approved, and signed by the potential site supervisor prior to submission to the Sport Management Internship Coordinator.

**Student Information**

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Last Name:

First Name:

Email:

Phone #:

SPT MGT Advisor:

**Prerequisite Verification**

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Completed Credits:

Current GPA:

Complete KNES 333 with a C or better:    Yes        No

Complete KNES 345 with a C or better:    Yes        No

**Internship Information**

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Academic Year Internship Will Be Completed

Designate Semester: Can designate more than one semester if applicable:

Fall	6 Credits	12 Credits
Spring	6 Credits	12 Credits
Summer	6 Credits	12 Credits

Organization Name:

Department:

Physical Address:

Phone:

Website Address:

Title:

Supervisor's Name:

Supervisor's Email:

**Internship Description and Learning Objectives**

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Internship Title:

Summary of expected internship learning experiences you have discussed with your site supervisor:

Enter the organization's vision:

Describe how your work will contribute to the organization's vision:

Identify the transferable skills your site supervisor expects to help you develop during the internship experience:

### **Site Supervisor & Student Acknowledgements**

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- Student must complete 300 hours during the semester. Partial credit is not given.
- Student is representative of Towson University and is expected to display utmost professionalism and decorum during the internship.
- Site supervisor accepts the responsibility to offer an educational experience for the student.
- Site supervisor acknowledges that there will be 4 collaborative assignments and 2 summative evaluations to complete with the student during the internship.
- The site supervisor should not hesitate to communicate concerns that arise to the TU Internship Director immediately.

We, the undersigned, have discussed and agree with the learning objectives, and will work together to support the completion of the objectives and tasks. We understand that any changes require approval from the TU Internship Coordinator.

Student Signature (Wet Ink)

Date

Site Supervisor Signature (Wet Ink)

Date

## TU CHP LIABILITY WAIVER AND RELEASE

Student Name:  
Address:  
Contact Number:  
Email Address:

In consideration of my participation in the KNES 445 Internship (hereafter, the "Fieldwork") during the semester and academic year of \_\_\_\_\_, I hereby agree as follows:

1. I am voluntarily participating in the Fieldwork with knowledge of the risks, and, upon the express agreement and understanding that, in consideration of being able to participate in Fieldwork, I am, for myself, and my legal representatives, heirs and assigns, hereby waiving, releasing, and forever discharging Towson University (the "University"), the University System of Maryland, the State of Maryland, and their directors, officers, agents, servants, contractors, and employees (collectively, the "Released Parties") from and against any and all such claims, costs, liabilities, expenses, or judgments, including attorneys' fees and court costs (collectively, "Claims") arising out of the Fieldwork or any illness or injury resulting therefrom and hereby agree to indemnify, defend and hold harmless the Released Parties from and against any and all such Claims by third parties arising out of my activities during such Fieldwork. I hereby further release the Released Parties from any claim whatsoever on account of any first aid, treatment, service, or service rendered to me during such Fieldwork.

2. I understand that there are rules and regulations in place and for my safety and protection agree to abide by any such established rules or regulations while engaged in the above-referenced Fieldwork, and agree to comply with all rules, regulations and standards of conduct fixed by the University, its agents and employees, regarding participation in the Fieldwork, and I have been fully advised of the activities planned for Fieldwork. I recognize the risks of illness and injury inherent in such Fieldwork and I voluntarily assume all risks associated with such Fieldwork. I further understand and agree that situations may arise during these events that may be beyond the control of the University and its agents and employees.

3. I agree that it is my sole responsibility to be familiar with the physical and/or mental demands associated with the activities planned. I have no physical impairment, disability, or other medical or mental condition that would medically, mentally, or physically disqualify me from participation in such Fieldwork. I represent that I am in good health and physically, medically, and mentally able to participate in such Fieldwork without danger to myself or to others, and that I carry medical insurance as required by University. 4. I agree for myself and any successors or assigns that the above representations and agreements are contractually binding and are not mere recitals. This waiver and release may not be modified except by another agreement in writing signed by the University. 5. This waiver and release shall be construed in accordance with the laws of the State of Maryland. I have carefully read this form and fully understand its contents.

**I am aware that this is a release of liability and a waiver of claims, an agreement not to sue, and a contract between myself and Towson University and I sign it of my own free will.**

Student Signature (Wet Ink)

Date

## Student Acknowledgements

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1. Please [complete this form](#) to communicate your schedule.
2. Then sign this final sheet then **save the entire packet as a PDF**.
  - a. Students are encouraged to use the Adobe PDF mobile App to create and send PDF Files.
  - b. This is due no later than 3 weeks before the start of the semester.
  - c. **This will only be accepted as a PDF with “wet ink” signatures via email.**
3. Students should obtain a complete job description for their internship from their site supervisor on organization letterhead.
4. Email this completed & signed KNES 445 Registration form AND the internship job description to the TU Sport Management Coordinator.

Student acknowledges:

- I understand that I must meet all prerequisites, including attending the KNES 445 enrollment meeting, to enroll in KNES 445.
- I understand that I cannot start accruing KNES 445 hours until the official start of the semester.
- I understand that I am responsible for tracking and maintaining a log of my hours worked throughout the semester.
- I understand that I will not pass KNES 445 if I do not accrue the required 300 hours within the posted start and end of classes for the semester.
- If enrolling in an additional 6 credits as an elective, I understand that I will not receive partial credit (3 credits) if I don't complete all 300 hours.
- Internships can only count up to 60 hours as coaching.
- Internships cannot be retail sales in nature (working at UA retail store).
- Internships cannot be front desk positions at a gym or organization.
- Internships cannot be clerical or support-type positions for an organization that generally would not require a college degree to obtain.
- **Falsifying signatures or work hours will be considered “Fabrication” as outlined in the TU Code of Conduct section pertaining to Academic Dishonesty. Penalties may include report to TU authorities, failure of assignment and failure of course.**
- **I understand that I may not be permitted to re-enroll in KNES 445 if I am dismissed from my internship for disciplinary reasons or quit the internship during the semester.**

Student Signature (Wet Ink)

Date