**STUDENT HANDBOOK**

 **MASTER OF SCIENCE**

**IN EXERCISE SCIENCE PROGRAM**

 **SCHOOL OF HEALTH SCIENCES**

 **OAKLAND UNIVERSITY**

 **2018-2019**

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**COURSE OFFERINGS IN THE EXERCISE SCIENCE PROGRAM**

 **COURSE OFFERINGS**

***NUMBER COURSE CREDITS GRADING***

**EXS 5000\* Introduction to Research (4)**

EXS 5300 Human Performance Enhancement (2)

EXS 5600 Health and Disease (2)

EXS 5620 Clinical Biomechanics (2)

EXS 5800 Exercise Endocrinology(2)

EXS 5810 Physical Activity Epidemiology (2)

**EXS 5010\* Advanced Exercise Physiology (4)**

EXS 5630 Basic Athletic Training (2)

**EXS 5020\* Biomechanics (3)**

EXS 5640 Exercise Electrocardiography (2)

**EXS 5030\* Diagnostic Testing and Exercise Prescription (3)**

EXS 5520 Health Promoting Lifestyle Choices and Interventions (4)

EXS 5310 Environment and Human Performance (2)

**EXS 5040\* Nutrition, Weight Management and Exercise (2)**

EXS 5400 Obesity and Physical Activity (2)

EXS 5200 Physical Activity and Aging (2)

EXS 5210 Children and Exercise (2)

EXS 5500 Healthy Lifestyle Choices (2)

EXS 5700 Corporate and Worksite Wellness Programs (2)

EXS 5100 Introduction to Personal Training (2)

EXS 5110 Advanced Personal Training (2)

EXS 5440 Preventative Nutrition Through the Lifespan (2)

**EXS 6950\* Exercise Science Internship I (2 or 4) (S/U,P)**

**EXS 6955\* Exercise Science Internship II (2 or 4) (S/U,P)**

EXS 6600 Administration of a Cardiac Rehabilitation

 or Community Exercise Program (2)

EXS 6700 Laboratory Instrumentation (2)

EXS 6800 Muscle Physiology (2)

EXS 6940 Seminar in Exercise Science (2)

**EXS 6995\* Research in Exercise Science**  **(2-6) (P)**

EXS 6920 Directed Study and Research (2) (P)

**Those courses identified with an asterisk (\*) are required for the M. S. in Exercise Science.**  Four credits are required in each of EXS 6950 and EXS 6955. Six credits are required in EXS 6995. All courses are graded traditional letter (A-F) unless noted above (S/U - Satisfactory/Unsatisfactory, P - Progress). The student must maintain an overall grade of B to graduate. In addition, for a course to count towards graduation a grade of B- or higher is required.

In addition to the required core courses and research courses (30 credits), students will select six credits of elective course work, approved by their advisor, either from the other program offerings above or from advanced course work (3000 level or above) in such areas as biology, chemistry, computer science, engineering, health science, physical therapy, or psychology. Graduate students in Exercise Science are not permitted to use 3000 and 4000 numbered EXS courses toward their graduate degree. The total number of credits required for graduation is 36.

 EXERCISE SCIENCE PROGRAM

 Tentative Two-Year GRADUATE Course Schedule

|  |  |  |  |
| --- | --- | --- | --- |
| **Even Numbered Year****Winter** | **Even Numbered Year Summer I (May/June)** | **Even Numbered Year Summer II (July/Aug)** | **Even Numbered Year Fall** |
| **EXS 5630 EXS 5020****EXS 5030 EXS 5040****EXS 5400 EXS 5500****EXS 6950 EXS 6955****EXS 6800 EXS 6995****EXS 6920**  | EXS 5300 EXS 5600 EXS 5630 EXS 5640EXS 5520 EXS 5210EXS 5500 EXS 5100EXS 6950 EXS 6955EXS 6995 EXS 6920 | **EXS 5810 EXS 5200****EXS 5500 EXS 5700****EXS 5110 EXS 6950****EXS 6955 EXS 6600****EXS 6995 EXS 6920** | **EXS 5000 EXS 5620****EXS 5010 EXS 5630****EXS 5020 EXS 5310****EXS 5500 EXS 6950****EXS 6955 EXS 6995****EXS 6920** |

|  |  |  |  |
| --- | --- | --- | --- |
| **Odd Numbered Year****Winter** | **Odd Numbered Year Summer I (May/June)** | **Odd Numbered Year Summer II (July/Aug)** | **Odd Numbered Year Fall** |
| **EXS 5630 EXS 5020****EXS 5030 EXS 5040****EXS 5400 EXS 5500****EXS 6950 EXS 6955****EXS 6700 EXS 6995****EXS 6920** | EXS 5300 EXS 5060EXS 5630 EXS 5640EXS 5520 EXS 5210EXS 5500 EXS 5100EXS 6950 EXS 6955EXS 6995 EXS 6920 | **EXS 5810 EXS 5200****EXS 5500 EXS 5700****EXS 5110 EXS 6950****EXS 6955 EXS 6600****EXS 6995 EXS 6920** | **EXS 5000 EXS 5620****EXS 5010 EXS 5630****EXS 5050 EXS 536****EXS 5500 EXS 6950****EXS 6955 EXS 6995****EXS 6920** |

 **FACULTY**

**I. GRADUATE FACULTY**

 Myung D. Choi, Ph.D. Telephone: (248) 364-8685

Assistant Professor of Exercise Science e-mail: choi@oakland.edu

(Obesity management, Exercise endocrinology,

 Biomechanics, Nutrition and activity) Office: 3169 HHB

 Dann Goble, Ph.D Telephone: (248) 364-8688

Associate Professor of Exercise Science e-mail: dgoble@oakland.edu

(Motor control, Balance) Office: 3157 HHB

Charles R.C. Marks, Ph.D. Telephone: (248) 364-8687

**Program Director** and e-mail: marks@oakland.edu

Associate Professor of Exercise Science

(Exercise physiology, Body composition, Office: 3160 HHB

Energy metabolism)

**II. CLINICAL/ADJUNCT EXERCISE SCIENCE FACULTY**

 Mary Anne Mikus, M.S. Terry Dibble, M.S.

 Special Lecturer in Exercise Science Special Lecturer in Exercise Science

 (First Aid/CPR, Aging and Exercise) (Behavioral aspects of exercise)

 Albert A. DePolo, Jr., D.O. Ronald L. Gellish, M.B.A, M.S.

 Clinical Assistant Professor Assistant Researcher

 (Urology) (Research design, statistical analysis)

 Barry A. Franklin, Ph.D. John J. Karazim, M.D.

Clinical Professor Clinical Associate Professor

(Exercise physiology, disease (Internal medicine, prevention)

prevention, cardiac rehabilitation)

 John F. Kazmierski, D.O. Clinton Brawner, Ph.D.

 Clinical Associate Professor Clinical Assistant Professor

 (Cardiology) (Cardiac Rehabilitation)

 Dennis Kerrigan, PhD.

 Clinical Assistant Professor

 (Cardiac Rehabilitation)

**II. CLINICAL/ADJUNCT EXERCISE SCIENCE FACULTY, continued**

Murray B. Levin, M.D. Sheldon D. Levine, M.S.A.

Clinical Professor Clinical Instructor

(Internal medicine) (Wellness, Exercise ECG)

 Creagh E. Milford, D.O. Robert C. Nestor, D.O.

 Clinical Associate Professor Clinical Assistant Professor

 (Cardiology) (Orthopedics)

 Rajendra Prasad, M.D. Chandra S. Reddy, M.D.

 Clinical Associate Professor Clinical Assistant Professor

 (Cardiology) (Cardiology)

 Robert L. Segula, M.D. Jack T. Wilson, Ph.D.

 Clinical Assistant Professor Adjunct Assistant Professor

 (Obstetrics and gynecology) (Stress Management)

**\_\_\_\_\_\_\_\_\_RESEARCH REQUIREMENT for the M.S. in EXERCISE SCIENCE\_\_\_\_\_\_\_\_\_\_\_**

Candidates for the Master of Science degree must choose to carry out an independent research project culminating with the completion of a master’s thesis, or to conduct in-depth study of an approved exercise-related topic, followed by presentation of a seminar and oral comprehensive examination, or to be mentored in research methods by an Exercise Science faculty member actively engaged in research. Students register for a total of 6 credits of EXS 6995 - Research in Exercise Science in order to complete this requirement.

The student should select their main research adviser. The adviser should be a person with whom the student can effectively work, and whose expertise is central to the student’s research. The research adviser may be, but need not be, the student’s assigned academic faculty advisor. The research adviser and the student, together, select two other faculty to serve on the advisory committee for the Comprehensive Examination and Thesis routes to completion of EXS 6995.

EXS 6995 can be completed in one of three ways:

# Completion of a Comprehensive Examination topic review paper or examination, followed by presentation of a seminar and oral examination.

1. Completion of a MS thesis and public defense of the thesis.
2. The research mentoring process.

Please see details of each of these on the following pages.

Oakland University School of Health Sciences

 **COMMITTEE APPROVAL OF EXS RESEARCH PROPOSAL (EXS 6955)**

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This form must be completed, approved by the Research Committee, and submitted by the student to the Exercise Science Program Director (Dr. C.R.C. Marks) at each of the following three times:

**1.** Submission required for **Initial Approval of Research Topic(s)** Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

**2.** Submission required if there is a **Change in Approval** Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_ New Committee \_\_\_\_ New Topic(s) \_\_\_\_ Thesis/Comps switch

**Topic Selection:** Select one: \_\_\_\_ Thesis \_\_\_\_ Comprehensive Exam \_\_\_\_ Mentoring

 Thesis/Comps Topic:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Research Committee Approval of Topic or Change:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

 Advisor (Chair) Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

 Advisor Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

 Advisor Signature Date

**3.** Submission required upon **Completion of Thesis Defense or** Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

 **Oral** **Comprehensive Examination or Mentoring**.

**Research Committee Approval of Completion: Grade**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ Advisor (Chair) Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

 Advisor Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

 Advisor Signature

Oakland University School of Health Sciences

 **COMMITTEE APPROVAL OF EXS RESEARCH PROPOSAL (EXS 6995)**

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This form must be completed, approved by the Research Committee, and submitted by the student to the Exercise Science Program Director (Dr. C.R.C. Marks) at each of the following three times:

**1.** Submission required for **Initial Approval of Research Topic(s)** Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

**2.** Submission required if there is a **Change in Approval** Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_ New Committee \_\_\_\_ New Topic(s) \_\_\_\_ Thesis/Comps switch

**Topic Selection:** Select one: \_\_\_\_ Thesis \_\_\_\_ Comprehensive Exam \_\_\_\_ Mentoring

 Thesis/Comps Topic:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Research Committee Approval of Topic or Change:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

 Advisor (Chair) Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

 Advisor Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

 Advisor Signature Date

**3.** Submission required upon **Completion of Thesis Defense or** Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

 **Oral** **Comprehensive Examination or Mentoring**.

**Research Committee Approval of Completion: Grade**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ Advisor (Chair) Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

 Advisor Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

 Advisor Signature

 **Method 1 for Completion of EXS 6995 - Research in Exercise Science**

 **COMPLETE THE COMPREHENSIVE EXAMINATION**

1. The comprehensive examination will consist of one written component, presentation of a seminar on the topic and an oral comprehensive examination. At the discretion of your examination committee, you may be required to write a publication quality review paper, a written examination, or both a paper and an examination on the topic being supervised. The written component must be completed first. Meet with your adviser often enough to make sure that your search of the literature is extensive, and your understanding of the literature is accurate. If writing a review paper on your topic, share your written work with your adviser periodically until your adviser is satisfied that it represents a thorough, comprehensive review of the topic. At that point you will prepare a PowerPoint Seminar presentation, and schedule a date for your seminar and oral examination. Your examination committee will hear your seminar, and ask you questions about your topic. The oral examination can also include questions of a general nature from the core subjects presented in the exercise science program.

2. A comprehensive examination committee will consist of three members. Two of these members must be either full-time exercise science faculty, exercise science clinical/adjunct faculty or full-time physical therapy faculty. At least one of the committee members must be a full-time exercise science graduate faculty member. The third committee member can be selected from all other university faculty or outside exercise science content specialists. Outside content specialists must submit their curriculum vitae/resume to the committee chair, and be approved by the chair.

3. The student will select an exercise science faculty member to serve as chair of the comprehensive examination committee. Together, the student and chair will identify the topic for study, and the other two committee members. With the assistance of the committee chair, the student is responsible to develop a brief (two page), point form outline of the topic. The outline will serve as a starting point for discussion with these committee members, and is subject to further revision upon their advice. (See the instructions for the Topic Outline on page 11)

4. The comprehensive examination topic shall reflect the expertise of the examination committee. This shall be insured by advisor approval of the topic suggested by the student. Once the topic has been selected and approved, you must have committee members sign the *Committee Approval of EXS Research Proposal (EXS 670)*, a copy of which is included in this Handbook (page 7-8). Submit this form to the office of the Director of the Exercise Science Program.

5. The student shall compile a reading list to be approved by the adviser. The adviser may recommend additional readings related to the topics to be covered.

6. The examination questions shall be made up by the student's comprehensive examination committee.

7. The student, working with the main adviser, will be responsible for working out the scheduling of the seminar, and the oral examination.

8. The student must complete the entire comprehensive examination requirement within two years of first registration in EXS 670. Until the oral examination requirement is complete, "P" (progress) grades will be assigned in EXS 670.

9. If your adviser sets an examination for you to write, it will be of an open book nature. You are welcome to bring all of the literature you found on the topic to the examination. See the example instructions, below, for such a written examination.

 **EXAMPLE COMPREHENSIVE EXAMINATION ON [TOPIC]**

 **COMMITTEE MEMBER [COMPREHENSIVE EXAM TOPIC ADVISOR]**

 **[DATE]**

~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~

General Instructions:

1. Your responses to the questions will involve synthesizing information you have learned up to this point in your education. You may use reference materials and reprints during the exam, however, you may not use your own notes.

2. Use and cite at least 15 different references. Following each quotation or fact citation, write the name of the first author and the year of publication in parentheses. For example: Left thoracic pain is more frequent among smokers (Kelly, et al., 2007). Include the listing of your references for this topic (that has been previously prepared as part of your literature search).

3. Write your answers clearly and legibly in black ink using only one side of each page.

4. Use complete sentences written in prose. You may, however, add diagrams, bullet points and outlines to expand upon your written prose.

5. After completing the exam, paperclip and seal all materials (including these pages) in the envelope provided, and deliver it to the Exercise Science Office.

NOTE: It is suggested that you read all questions before beginning. When preparing your answers, you may wish to refer to information contained in another answer. If you do, make your referral specific. For example, write: "Refer to third paragraph on page 5." It would not be sufficient to only write: "See above."

\_\_\_\_\_\_\_

\*These instructions may vary from advisor to advisor, depending on the topic or previous arrangements with your advisor.

**Comprehensive Examination Topic Outline Explained**

The Comprehensive Examination topic should focus on exercise, and should be a thorough, comprehensive examination of all aspects of the topic. Each topic will have unique aspects, but all topics should address the physiological, biomechanical, psychological, and social aspects of the topic. By the time you finish you should have answered the time-honored questions of the “Who, What, When, Where, and Why?” of your topic. By the time you complete your comprehensive examination of the topic you should be capable of sitting at a table with 2 or 3 of the world’s best experts on that topic and ‘holding your own’ in a knowledgeable discussion of all different aspects of the topic. To get to that point you need to do a thorough, comprehensive search of the literature, both directly on your topic, and indirectly on literature that supports your understanding of the topic. To be able to do that you should start with a Topic Outline.

The Topic Outline for your Comprehensive Examination topic should be a “roadmap” of aspects of the topic that you will use to search for the literature on that topic. It should serve as guide to your search so that you find everything you should. Think about your overall topic and consider what kinds of information you need to seek. You should not need to start searching the literature to do this. Just think about it and write down what kinds of information you need on the topic. As you think of things, just write them down. Don’t worry about whether they are in the right order. You can do that later. Remember to address those aspects of the topic spelled out in the paragraph above. After you have written everything down, take a look at your list and start putting it into some logical order. As you do, think of any sub-headings that might fit under main headings and add them. Since it is focused on exercise all topics should address the role of exercise in the preparation for action or prevention of problems. Further, every topic should have a section on exercise prescription involving Frequency, Intensity, Time Duration, and Type of exercise (FITT), plus the factors influencing Progression.

Set your Topic Outline up in a bullet-point form with headings, sub-headings, and even sub-sub-headings. It should grow and change as you find new things on your topic that should be there, but were not in the initial outline. You can use your Topic Outline to suggest Key Words to use in Databases to search for information on the topic. As you find information to ‘populate’ your paper, you can refer back to your topic outline to remind yourself of areas of the topic on which you do not have sufficient information, so that you can seek that information. Keep searching for information on each aspect of your topic until you reach a point of ‘saturation.’ That means that you keep looking for new information on aspects of the topic until the more you find, the more you are saying that you have already found similar information from various quality sources.

The Topic Outline should slowly ‘morph’ into your research paper on the topic where the Outline Headings become sections in your paper. **PROCESS FOR** **COMPLETING**

**EXERCISE SCIENCE**

**COMPREHENSIVE EXAM:**

In consultation with your Committee Chair identify/

Discuss a topic related to exercise science

Topic Topic too broad

approved too narrow, other

 topics suggested

In consultation with Chair, identify

two additional topic advisors (Comprehensive

Exam Committee Members)

Develop initial topic outline in consultation with Chair

Consult other two advisors

Each agrees to serve Does not agree to

on Committee serve on Committee

Committee members sign EXS 670 Approval Form

Apply for graduation before the end of the first two weeks of the semester in which you will have fully completed all degree requirements (including the oral comprehensive examination.

In consultation with your advisor, refine topic

as necessary

Begin review of topic

Literature searches (First Search, MEDLINE, SPORTDiscus, PsychLit, article bibliographies, etc.)

Identify references (as many as necessary to

fully understand the topic) from refereed journals,

a few books, quality websites (.org, .edu, .gov), etc.

Present and discuss references with

advisor for your topic

OK?

Yes No

Plan a date and decide on format (research paper

or open book exam) for written work on topic

Study and review references; possibly

identify additional references for topic

Writing a research paper?

Yes No Write Exam

Submit a draft of your research paper

complete with citations and references

Advisor satisfied Advisor wants revisions

 Revise paper and

Prepare 45 minute PowerPoint seminar based on topic

Share with Adviser.

Adviser is satisfied?

Yes No. Revise and share

 with adviser

Approximately 4 weeks before completing the written work for your topic contact your Advisor to set a date and time for the oral examination. (Orals should be scheduled for approximately one week following completion of the PowerPoint seminar.) Insure that the oral is scheduled to take place at least one week before the end of the semester.

Ask your Advisor for feedback on your written work on your topic and whether any problem should be addressed in preparation for the orals.

Practice delivery of your seminar with your adviser

Present your Seminar and complete oral comprehensive examination (approximately 2 hours). Each Advisor asks for elaboration and clarification of the written work and may ask questions about any aspect of exercise science.

Student is dismissed from examination room for approximately 20 minutes while Committee debriefs written and oral performance. A consensus grade is determined (0.0 to 4.0)

Student returns for summary and feedback.

Pass (>2.5) no pass (<2.5)

Grade submitted Is student re-examined

 (in written and/or oral

All requirements formats) on the topic(s)

are completed necessary?

M.S. in Exercise yes no

Science conferred.

Consult University pass?

website for

commencement yes no

ceremony date.

 Failing grade

 submitted.

 Student does not

 graduate.

**Method 2 for Completion of EXS 6995 - Research in Exercise Science**

**COMPLETE A MASTER'S THESIS**

1. A thesis committee will consist of at least three doctorally-prepared faculty. Additional doctorally or master's prepared faculty may be committee members. Two of these faculty must be either full-time exercise science faculty, exercise science clinical/adjunct faculty or full-time physical therapy faculty. At least one of the committee members must be a full-time exercise science graduate faculty member. The third committee member can be selected from all other university faculty or outside exercise science content specialists. Outside content specialists must submit their curriculum vitae/resume to the committee chair, and be approved by the Program Director.

2. The student will select an exercise science faculty member to serve as chair of the thesis committee. Together, the student and advisor will select the other two committee members.

3. The thesis requirement will consist of the completion of an original, independent research project culminating in the publication of a written thesis as described in the **"Exercise Science Program Guidelines for Thesis Format"** (see page 15) and Oakland University publication **"A Guide to the Preparation of Theses and Dissertations"** (found online at <http://wwwp.oakland.edu/gradstudy/current-students/thesisdissertation/>). Theses must follow the Exercise Science format template. This template can be obtained by contacting Esther McCoy, Office of Graduate Study (248-370-2962). In addition, an oral defense of the thesis will be scheduled following acceptance of the written thesis. This defense shall be open to the public.

4. Committee approval of a student's project is required before data collection can begin. This is generally accomplished by committee approval of the thesis proposal. The proposal forms the basis of the first three chapters (Introduction and Statement of Problem, Review of Literature, and Methods and Procedures) of the thesis. Please have committee members sign the *Committee Approval of EXS Research Proposal (EXS 670)*, a copy of which is included in this Handbook.

5. All thesis research involving human subjects must be approved by the Oakland University Institutional Review Board. All students doing human subject research must be CITI trained and certified. For details of CITI training and IRB approval go to <http://wwwp.oakland.edu/research/compliance/>.

6. The student must register for six credits of EXS 6995 under the name of their Faculty mentor. It is best if you register for all 6 credits of EXS 6995 in the semester in which you expect to defend your thesis. If necessary, this course can be taken in smaller increments (1 to 5 credits). Until the thesis requirement is complete, "P" (progress) grades will be assigned in EXS 6995. Students have two calendar years to resolve a "P" grade. Therefore, the thesis requirement must be satisfied within two years of first registration in EXS 6995.

7. Students completing a Master’s thesis are required to submit seven unbound copies of the approved manuscript to the Office of Graduate Study by the date specified in the *Schedule of Classes*. Three copies are for Kresge Library (2) and the Graduate Study (1). Four copies are required for the Program in Exercise Science office (1), for the student's primary thesis adviser (1) and for members of the thesis committee (2). The Graduate Office will arrange for binding of all seven copies of the thesis.

**PROCESS FOR COMPLETING A THESIS IN EXERCISE SCIENCE:**

In consultation with Committee Chair, identify topic, research question and two additional thesis Committee Members

Consult other members

Each agrees to Does not agree to serve

serve on Committee on Committee

Meet with Chair to plan methods, data collection, protocol, timeline, IRB review, funding, etc.

Draft prospectus [title of the thesis, background with brief literature review, problem statement, purpose/hypothesis(es)].

Revise with advice of Chair\*

Prospectus approved According to Chair,

by Chair prospectus is in need of

 further refinement

Submit prospectus to the other Committee Members

Obtain Member’s review and feedback; refine accordingly

Student schedules a Committee meeting where he/she presents the prospectus verbally and obtains written approval (Committee Members sign EXS 670 Approval Form)

In consultation with Committee Chair, implement data collection

Obtain “Thesis/Dissertation Manual” from Graduate Study website. During data collection, complete drafts of chapters 1, 2, and 3 (based on prospectus)

Drafts are reviewed by Committee Chair

Revise according to the advice of the Chair. Possibly consult with other Members regarding specific questions, statistical analysis, etc.

Submit chapters 1, 2, and 3 to other Members

After data collection, summary and analysis, complete drafts of chapters 4 and 5. Continue revisions of chapters 1, 2, and 3.

Make appointment with the Office of Graduate Study thesis/dissertation coordinator for review of manuscript compliance with preparation guidelines.

Drafts of thesis reviewed by Chair

Revisions made according to advice of Chair

When nearing completion of final draft, submit to other Members. Obtain other Members’ review and feedback; revise accordingly.

Apply for graduation according to Office of Graduate Study guidelineIn consultation with Chair, student schedules oral defense at a time and date agreeable to student and Committee Members

“Final”\*\* draft of thesis submitted to Committee Members

“Final”\*\* draft of thesis submitted to Office of Graduate Study for approval of format and layout.

Oral defense. Starts with a presentation that goes beyond the abstract, but shorter than the whole thesis. Emphasis on problem, purpose/hypothesis(es), methods and discussion of the results (Approximately 20-45 minutes). Audiovisuals (Powerpoint) are presented as if the project were being presented at a national research meeting. Public question and answer period follows (approximately 1 – 1 ½ hours).

Members of the public and the candidate are asked to leave the room. The Committee debriefs the written and oral performance and discusses any further changes required in the thesis.

Some revisions (usually minor) may be necessary following the defense.

All Committee Members agree on a grade (> 2.5) and agree to sign approval page of the thesis?

yes no

Student is invited back in to meet with the Committee. The Committee provides feedback and the final grade (2.5 to 4.0) to the student.

Student obtains original signatures on the thesis signature pages (one for each thesis copy to be bound).

Seven copies (minimum) of the unbound thesis on cloth-content quality paper submitted to the Office of Graduate Study (two for graduate office and Library, one for the Exercise Science Program, one for each Committee Member, and one for the student). Additional copies may be submitted for binding.

All requirements completed.

M.S. in Exercise Science conferred. Consult University website for commencement ceremony date and details.

\*”There is no such thing as good writing. There is only good re-writing.”

\*\*Some revisions (usually minor) may be necessary following the defense.

**EXERCISE SCIENCE PROGRAM**

 **GUIDELINES FOR THESIS FORMAT**

The following is the recommended format for theses in Exercise Science. As a minimum, the thesis should contain the following sections. By the recommendation of the thesis chairperson, the sections marked by an asterisk (\*) may also be included in addition to other suggestions on style and content.

**The Preliminaries\*** (See Oakland University/Office of Graduate Study A Guide to the Preparation of Theses and Dissertations -- (found online at <http://wwwp.oakland.edu/gradstudy/current-students/thesisdissertation/>).

**\*Please Note: In the Exercise Science Program an Abstract is a Required element of the Preliminaries.**

**Chapter 1: Introduction**--an orientation to the field of inquiry which leads to the specific project or investigation.

 Overview or organization of the chapter\*

 Background

 Definition of terms\*

 Statement of the problem

 Purpose

 Research question(s), and/or hypothesis(es) and corresponding null hypothesis(es)

 Definitions

**Chapter 2: Literature Review**--a review of the pertinent published information relative to the thesis project. Spoken quotations from authoritative sources and professional meetings may be included if the information has not yet been published. The literature review should provide a thorough review of the subject area, but it is not necessarily exhaustive.

 Overview or organization of the chapter\*

 Literature review

 Summary(ies) of the major issues/topics reviewed

**Chapter 3: Methods**--a description of the methods used in sufficient detail so that the study may be duplicated.

 Overview or organization of the chapter\*

 Subjects

 Instrumentation

 Procedures

 Statistical analysis

**Chapter 4: Results**--the factual observations and/or numerical data of the study. Generally it is short, free of commentary, and it presents the data as tables, photographs, etc. Commentary is reserved for the discussion in Chapter 5. The presented results are supported by the text which guides the reader through the most important points.

 Overview or organization of the chapter\*

 Results

 Summary of the findings

**Chapter 5: Discussion**--explains the meaning of the results in view of the problem, purpose, and previous information known and published. This chapter complements Chapters 1 and 2, and explains what was learned in Chapters 3 and 4. The conclusions represent what was learned in this study and may not go beyond the data. The discussion section is the place for the author to comment and speculate.

 Overview or organization of the chapter\*

 Discussion

 Limitations of the study

Conclusions

 Future directions

 Recommendations for future investigators

**References**

**Appendix\***--contains supporting materials and documents which are too lengthy to include in the text. Examples of such materials are I.R.B. Approval letters, logs, questionnaires and informed consent forms.

**A Guide To The Preparation of Graduate Theses/Dissertations**

 All Master’s theses presented to the Exercise Science Program must follow the approved format. Oakland University Graduate Study format requirements are spelled out online at <http://wwwp.oakland.edu/gradstudy/current-students/thesisdissertation/>.  [Students completing a thesis are strongly urged to click on all links on this page to determine all Oakland University Graduate Study requirements for thesis preparation. It is mandatory that these requirements are followed. In addition, the Exercise Science Program has established a specific format template (found online at <http://wwwp.oakland.edu/gradstudy/current-students/thesisdissertation/>). This template is to be used, along with the Graduate Study format requirements](http://www2.oakland.edu/grad/grad2/manual/manual.doc.) to complete the thesis in the required format. It is strongly recommended that, when starting to write the thesis, you download the Exercise Science format template, and use it for your very first draft. This will insure that the correct format is being followed. If the Exercise Science format template and the Graduate Study format requirements are not the same, please follow the instructions in Appendix A in the Graduate Study document **“**A Guide to the Preparation of Theses and Dissertations” found online at <http://wwwp.oakland.edu/gradstudy/current-students/thesisdissertation/>.

 OAKLAND UNIVERSITY

 GRADUATE COUNCIL POLICY

 **Thesis Processing Requirements**

1. **Application for graduation** - Applications for graduation are due by the published deadline in the *Schedule of Classes* for the term in which the student expects to graduate. See the deadline dates published at <http://www.oakland.edu/important-dates>.
2. **Scheduling thesis defense** - The thesis defense must be scheduled 6 weeks prior to the last day of the semester. See the deadline dates published at <http://www.oakland.edu/important-dates>.
3. **Approval of thesis format** - The Office of Graduate Study must approve the master's thesis format that will be used in the final draft at least one term prior to the defense of the thesis.
4. **Deadline for submitting theses to the Office of Graduate Study** - All theses must be submitted to the Office of Graduate Study 4 weeks before the last day of the semester. See the deadline dates published at <http://www.oakland.edu/important-dates>. Those students defined as severe hardship cases, where situations deemed outside the control of a student prevents completion of the required manuscript, may apply for a 14 day extension. A Petition of Exception, justifying the hardship, must be submitted by the chair of the thesis committee and approved by the Office of Graduate Study before a manuscript can be accepted beyond the deadline. No extensions will be granted for requests 14 days beyond the published deadline.
5. **Participation in graduation ceremony before completion of degree requirements** - It is Graduate Council Policy that Master's students, within one term of completing their degree requirements, may participate in commencement. A "Request to Participate in Commencement Ceremony" form (see the form at <http://wwwp.oakland.edu/commencement/general-information/>) must be approved by their academic advisor, the Exercise Science Program Director, and the Dean of the School of Health Sciences and submitted to the Office of Graduate Study.

**Method 3 for Completion of EXS 6995 - Research in Exercise Science**

**COMPLETE RESEARCH MENTORING**

The Research Mentoring choice is an alternative track for a MS in Exercise Science student to fulfill all requirements for EXS6995. This will entail the graduate student getting approval from one exercise science faculty member willing to mentor the student and take on the responsibility to insure that all objectives, listed below, are satisfactorily completed. In general, the student should expect to be involved with the mentor through the whole research process: Idea, search for/review/critique/synthesis of literature, formulation of question, proposal, IRB, data collection & analysis, interpretation/discussion of results, and dissemination. Dissemination will include one or more of the following: Writing and submitting an abstract to a state, regional or national scientific conference, accomplish significant work on a manuscript submitted for publication, and/or present the research at a School of Health Sciences seminar.

The following are general objectives for this track with specifics determined by the Faculty Mentor:

1. Make sure to check the “Research Mentoring” box on the EXS6995 Committee form and once the Faculty member agrees to be your mentor, have him/her sign the committee form at the committee “Chair” line. No other signatures are necessary since usually this will involve only one Faculty member.
2. Discuss idea(s) for research in light of experience, observation, and the research literature.
3. Do a thorough search of the research literature on the idea.
4. Discuss important aspects of this search and critique the research literature.
5. Synthesize the information from this search and write a thorough review of the literature.
6. Be able to formulate a research question that can be tested within the available resources.
7. Work on the design of a research study.
8. Understand the choice of statistics to be used.
9. Be able to set up a data base for use with a particular statistical package.
10. Become familiar with the methods and protocols for a research study.
11. Be proficient in the measurement of at least one variable under study.
12. Work on the IRB application
13. Complete CITI training
14. Be able to set up, use & put away equipment in a testing area.
15. Put together a data table and collect data.
16. Analyze at least one of the study variables
17. Discuss how the results affect the research question, how the results compare to other research reports, and the impact on future research.
18. Critique the study.
19. Write and submit an abstract for presentation at a state, regional or national scientific meeting, co-author a manuscript for publication and/or present the research findings at a School of Health Sciences Seminar.
20. After satisfactory completion of all expected objectives, the Faculty Mentor will sign and assign a grade to the EXS 6995 Committee form and submit it to the Program Director.

**Exercise Science Program**

**Writing Guidelines**

EXS students are expected to produce individual, unaided, original work (unless informed otherwise).

**PLAGIARISM**

According to the Oakland University Academic Conduct Regulations, plagiarism is:

 **“using someone else’s work or ideas without giving that person credit. By doing this, a student is, in effect, claiming credit for someone else’s thinking. Whether the student has**

**read or heard the information used, the student must document the source of information.”**

Plagiarismis a serious academic offence. Potential consequences (Oakland University Student Handbook, 2007-2008 <http://www4.oakland.edu/?id=1610&sid=75>) for plagiarizing may include:

• Academic disciplinary warning

• Academic probation

• Suspension

• Expulsion (dismissal) from the university

Students are required to acquaint themselves with the nature of plagiarism and methods of avoiding plagiarism. See <http://research.library.oakland.edu/sp/subjects/tutorial.php?faq_id=35>.

The following expectations exist for research and submission of all written work in the EXS Program:

**TENSE**

All writing must be in past tense, unless a proposal is being written. Colloquial, conversational language is to be avoided.

**CITING REFERENCES IN THE TEXT**

References must be cited in the text using a modification of the APA system (author, date), for example:

• Single author: The energy cost ratio for concentric to eccentric work is 3:1 (Rorke, 1993). *Note the placement of the comma and period.*

• Two authors: Rorke and Rorke (2002) advocate task-specific physical readiness evaluations (PREs) for those engaged in physically demanding occupations.

• Multiple authors: Blair et al. (2002) argue that physical inactivity is the number one public health challenge facing the USA today. Or;

• Physical inactivity is the number one public health challenge facing the USA today (Blair et al., 2002).

• Direct quotes should be avoided, or used very sparingly. If used, the page number must be given for a direct quote, thus: Cooper said “get fit” (Cooper 2000, p98). Note: Author, year, page number, in that order.

• If a direct quote exceeds 3 lines it must be indented.

• Internet references should be used sparingly, and if used, it is preferable to establish the name of the author. See below for how to cite Internet References in the Reference list.

• Students must do a MEDLINE, SPORT DISCUS or other library data base search before using any Internet sources.

**REFERENCES**

At the end of all written projects work a Reference list must be attached, under a major heading: REFERENCES. The titles “Works Cited” and/or Bibliography *may not be used*. Every reference cited in the text must appear in the Reference list, and every Reference cited in the list must be used in the text of the paper. References must be listed in alphabetical order based on the first author’s last name. Items in the reference list are written in the following manner:

**For journal articles:**

Gledhill, N. and Jamnik, V.K., (1992) Development and validation of a fitness screening protocol for firefighter applicants. *Canadian Journal of Sport Sciences 17(3),* 199-206.

**For books**

Thibodeau, G.A. and Patton, K.T (2002) *The human body in health and disease.* Third Edition. Mosby, Philadelphia.

**For a citation in a book:**

Haddon, W., Jr., (1970) On the escape of tigers: An ecological note. In: Mohan, D. and Tiwari, G., Editors, (2000) *Injury Prevention and Control*. Taylor and Francis, New York.

**For proceedings:**

Greenhorn, D.R., Stevenson, J.M. and Deakin, J.M., (1996) Gender-fair selection Tests: legislative, procedural and biomechanical factors. *Proceedings of the Canadian Society for Biomechanics IXth Biennial Conference,* Burnaby, British Columbia, 330-331.

**For an Internet Reference:**

*Injury and violence prevention.* Healthy People 2010 (2000). Centers for Disease Control and Prevention. Available at: http://www.healthypeople.gov/document/HTML/Volume2/15Injury.htm Accessed on August 8, 2003. [Students must provide complete URL, not merely the Home Page URL].5

**For a direct statement from an authority/person:**

Andress, W.C. (2005) Personal Communication. September 2005, Oakland University, Rochester Michigan, USA.

**NOTE ON UNACCEPTABLE WRITING AND REFERENCING PRACTICES**

• “Cutting and pasting” is unacceptable. Paraphrase and give credit to the original author.

• Verbatim use of Tables and Figures by photocopying is unacceptable (this infringes copyright because author and/or publisher permission is required). However, selective use is acceptable if the reference for the material is clearly cited adjacent to the Table or Figure.

**FURTHER IMPORTANT CONSIDERATIONS WHEN WRITING IN EXS**

• The first time an abbreviation is used in the text it must be defined e.g. Heart rate (HR) increases linearly when exposed to linear increases in workloads on a treadmill.

• Do not start sentences with numbers or percentages e.g. 21 subjects took part; 40% of all US children are obese. Write the word in full i.e. Twenty-one subjects … Forty percent…

• Do not use colloquial language or trite expressions (everyday speech/slang).

• Avoid all first and second person conversational writing i.e. use of “I,” “me,” “you,” “your.”

• All work must be spell-checked and proofed for grammar. If writing English as a second language it must be language corrected.

(The above policy is substantially based on the School of Health Sciences, Wellness, Health Promotion and Injury Prevention program Writing Policy. See <http://www.oakland.edu/Upload/docs/SHS/WHP/WHP_Writing_Policy.pdf>.)

**POLICY ON ETHICS**

 Along with scholarly preparation in the appropriate academic disciplines, high levels of ethical conduct are considered essential for those who are involved in health care. Students are expected to comply with the principles of the Code of Ethics and Professional Conduct of the American College of Sports Medicine. Violations will be brought before the faculty and could result in dismissal from the program.

 **Code of Ethics and Professional Conduct of the American College of Sports Medicine**

 **A. Principles and Purposes:**

 **Preamble:** These principles are intended to aid Fellows and members of the College individually and collectively to maintain a high level of ethical conduct. These are not laws but standards by which a Fellow or a Member may determine the propriety of his/her conduct, relationship with colleagues, with members of allied professions, with the public, and with all persons in which a professional relationship has been established. The principal purpose of the College is the generation and dissemination of knowledge concerning all aspects of persons engaged in exercise with full respect for the dignity of man.

 ***Section 1*:** Members should strive continuously to improve knowledge and skill and make available to their colleagues and the public the benefits of their professional attainment.

 ***Section 2*:** Members should maintain high professional and scientific standards and should not voluntarily associate professionally with anyone who violates this principle.

 ***Section 3*:** The College should safeguard the public and itself against members who are deficient in ethical conduct of professional competence.

 ***Section 4*:** The ideals of the College imply that the responsibilities of each Fellow or Member extend not only to the individual, but also to society with the purpose of improving both the health and well being of the individual and the community.

 **B. Maintenance of Good Standing in Regulated Professions:**

 Any Fellow or Member required by law to be licensed, certified or otherwise regulated by any governmental agency in order to practice his or her profession must remain in good standing before that agency as a condition of continued membership in the College. Any expulsion, suspension, probation or other sanction imposed by such governmental agency on any Fellow or Member may be grounds for disciplinary action by the College.

 **C. Public Disclosure of Affiliation:**

 Any Member or Fellow may make disclosure of affiliation with the College in any appropriate professional conduct, including use in curricula vitae, biographical descriptions or other professional announcements, provided the disclosures are made in a professional, dignified manner, and are not made in connection with any commercial venture. A commercial venture as used herein means any sale of goods, services, or other property for a valuable consideration with the exception of books, articles and other publications. Disclosure of affiliation in connection with a commercial venture may not be made without the prior written authorization of the College. Requests for such authorization should be made in writing to the Executive Vice President of the College. On business or professional cards, the only disclosure of affiliation that may be made is the use of initials "F.A.C.S.M." following the name of a Fellow. Members other than Fellows may not disclose their affiliation on business or professional cards. Disclosure in violation of this article may be grounds for disciplinary action.

 **D. Discipline:**

 Any Fellow or Member of the College may be disciplined or expelled for conduct which, in the opinion of the Board of Trustees, is derogatory to the dignity of or inconsistent with the purposes of the College. The expulsion of a Fellow or Member may be ordered upon the affirmative vote of two-thirds of the members of the Board of Trustees present at a regular or a special meeting, and only after such Fellow or Member has been informed of the charges preferred against him and has been given an opportunity to refute such charges before the Board of Trustees. Other disciplinary action such as reprimand, probation, or censure may be recommended by the Committee on Ethics and Professional Conduct and ordered following the affirmative vote of two-thirds of the members of the Board of Trustees present at a regular or special meeting or by mail ballot, provided a quorum take action.

EXERCISE SCIENCE GRADUATE ASSISTANTSHIPS

 Positions and Compensation

 The Exercise Science Program has two assistantship positions available for full-time students for teaching undergraduate Health Enhancement (EXS 1000 and 1100) courses. Each graduate assistant is paid a yearly stipend of approximately $5,500. In addition, each assistant has tuition waiver for up to 16 credits (8 per Fall and Winter semester). Tuition waiver is not available in Spring/Summer semesters.

 Tenure and Duties

 The assistantships begin August 15 and end May 1, encompassing the academic year. These positions are filled yearly, however, it is understood that satisfactory performance in the first year will lead to virtually automatic appointment in the second year. Assistantships require the commitment of twenty hours per week of involvement. Graduate assistants in the Exercise Science Program are responsible to the EXS Program Director or designee for their assignments. Credit towards the 20 hours is based on: 1 hour per class hour; and 2/3 hour outside class per class hour for preparation, marking and advising. Accordingly, the following assignments apply:

 Teaching: Hours/wk:

 EXS 1000 Up to 20 hours (Resistance Weight Training)

 EXS 1100 Up to 20 hours (Cardiovascular Fitness Training)

EXS 3010 Up to 20 hours (Exercise Physiology Laboratory instruction)

 Depending upon the combination of teaching assignments, faculty research assistance will be assigned to make up the full 20 hour per week load.

 Selection

 Selection of incumbents to fill these positions will take place during April and early May. Selection will be based on skills and qualifications of the applicants with the best qualified being assigned. As much as possible the wishes of the applicant will be taken into account, however, there are no guarantees that it will be possible to assign everyone to their first choice.

 Application Procedure - Obtain application form from, and return it to:

Charles R. C. Marks, Ph.D.

Exercise Science Program

School of Health Sciences

Oakland University

Rochester, MI 48309-4402

email: marks@oakland.edu

 **PLEASE NOTE:**

 The Department of Campus Recreation also offers assistantships in Fitness/Wellness, Marketing, Facilities Management, and Aquatics. Similarly, the Department of Athletics offers assistantships. Students in the Exercise Science Program are encouraged to contact these two departments for information on these assistantships.

**EXCEPTIONS**

 Exceptions to any degree requirements or guidelines as stated in this handbook or the Oakland University Graduate Catalog shall be handled on an individual basis. Such exceptions must be presented to a faculty advisor using the Graduate School Petition of Exception form. This form is found at the following website: <http://wwwp.oakland.edu/gradstudy/top-links/forms/>. Petitions will be reviewed by the program director and considered by the Committee on Instruction of the School of Health Sciences before being forwarded to the Dean of Graduate Study for final decision. Petitions should be submitted a full semester before the term in which the exception is needed.

 **LIABILITY INSURANCE**

 All students beginning the internships are automatically covered for professional liability insurance by Oakland University.

 **OAKLAND UNIVERSITY**

 **School of Health Sciences**

 **EXERCISE SCIENCE PROGRAM**

 **GENERAL INFORMATION ON INTERNSHIP REQUIREMENTS**

 Every student pursuing the MS in Exercise Science degree is required to complete two internships at approved sites. See the list of approved sites beginning on page 37. There are two routes to completion of the internship requirements: 1) Clinical and Non-Clinical route; or, 2) Strength and Conditioning route. In both routes students will complete a minimum of 448 hours of internship and a Competency Checklist specific to the route followed.

It is expected that, during these internships, the student will become competent in applying exercise

science principles in either: 1) primary and secondary disease prevention settings; or 2) a strength and conditioning, human performance enhancement setting. The scheduling of internship time at a facility will be at the discretion of the facility.

 Students must be authorized to register for, or start an Exercise Science internship. This involves notifying your graduate faculty advisor in writing of intent to register for EXS 6950 or 6955 a minimum of **SIX** months prior to registration. This communication must include the desired internship site. The prerequisite for enrolling in the internship courses is 20 credits of graduate study, including EXS 5010, 5020, and 5030. The student completing the Clinical/Non-Clinical route should insure that they have a thorough working knowledge of basic ECG rhythm strip interpretation, blood pressure measurement, and normal anatomy and physiology of the cardiovascular system.

In order to either start an internship or register for either EXS 6950 or EXS 6955 you must ask the Exercise Science Program Director to enter an override into SAIL.  In order to get the override bring the Program Director copies of each of the following in a sealed envelope:

 1) Proof of current health insurance;

2) Proof of current CPR certification (minimum BLS-CPR);

3) Proof of recent (last 6 months) physical examination by medical practitioner.  A simple one sentence statement indicating you have been medically examined and are cleared to start the internship on the doctor's Rx pad or letterhead is fine;

4) Evidence of Hepatitis B vaccination **OR** a signed, dated statement of declination of vaccination.

5) Students completing their internship at William H. Beaumont Hospital (Royal Oak) must also provide proof of immunity to rubella (German measles), rubeola (measles), and varicella zoster (chicken pox), and provide proof that they are free of active pulmonary tuberculosis which shall require a negative PPD (Tb) test given within one year of the start date of their clinical experience.  In addition, these students must also successfully pass a criminal background check, including a check of the sexual offenders database.

In addition, please also include information in the envelope as follows:

* Which internship you wish to register for (EXS 6950 or EXS 6955)
* What semester you want to register for this internship (Fall, Winter, Summer 1, or Summer 2)
* Your name and G number
* Your email address

With this information, the Program Director will enter an override into SAIL and email you to advise you that you have permission to register for the internship.

HEPATITIS B VACCINE

ACKNOWLEDGMENT OF RISK AND RELEASE

School of Health Sciences Students

 I understand that as part of my internship experience as an Exercise Science student, I may be exposed to blood or other potentially infectious material and that, as a result, I may be at risk of being infected by the Hepatitis B virus. I understand the at Hepatitis B is a severe and potentially life threatening illness and that taking the Hepatitis B vaccinations series would significantly reduce my risk of being infected by the Hepatitis B virus. Nevertheless, I have elected not to take the Hepatitis B vaccinations and assume responsibility for all arrangements, costs, and complications arising from not taking the Hepatitis B vaccine series. I agree to release, discharge, indemnify and hold harmless Oakland University, its trustees, officers, employees, representative and agents, and the facility where I receive my exercise science training, from any and all costs, liabilities, expenses, claims, demands, or causes of action arising out of or resulting from my declining the Hepatitis B vaccinations. I also understand that if the hospital or clinical agency where I have chosen to complete my internship experience requires students to be immunized for Hepatitis B, the School of Health Sciences will attempt to reassign me to another internship site, but cannot guarantee placement, and therefore I may not be able to take the required course.

 Student name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Student Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Signature of parent or guardian if student is a minor)

 Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Planning for your Internships (Choose Clinical/Non-Clinical internships **or** Strength and Conditioning internships, not both or a combination)

 **Clinical/Non-Clinical Internships:** By the time you finish both internships you must have completed all the required competencies on the Clinical and Non-Clinical Internship Competency Checklist (Page 33 in this Handbook). You will notice that some of these competencies are clinical in nature and some are non-clinical in nature. Some of the internship sites enable completion of both clinical and non-clinical competencies while other sites enable just one type or the other. While completing your two internships at two different sites is preferable, you can complete both internships at the same site as long as you can do at least 448 hours, all the Required Competencies, and at least 10 of the Optional Competencies at that site.

 EXS 6950 - At least one internship should be taken at a health promotion/disease prevention facility. Ideally, this should be your first internship. Getting an internship is a competitive process. Due to the large number of requests for a limited number of internship positions at these sites, it is recommended that students contact the internship coordinator at the desired site **at between six and three months prior to the initiation of the internship**. It is recommended that you start looking for an Internship site early so that you are assured of a spot to do your Internship during the semester of your choice.  Internship coordinators are busy people and tend not to respond to phone or email inquiries from potential interns. Thus, it is recommended that you actually go to the potential Internship sites all dressed up as if you were going to a job interview, with your resume, your Oakland Grades (SAIL copy is fine), and a copy of the MS in EXS Handbook.  If you can interview for the Internship right then and there, great!  If not, you can set up an appointment to come back later to talk to the intern supervisor.  It is best to go to several possible sites to maximize your chances of getting offered an Internship. See the Exercise Science Program Director for suggestions for alternative internship sites if you are having difficulty securing a site for EXS 6950.

 EXS 6955 - The second internship (EXS 602) can be taken in health promotion/disease prevention or in a different area such as corporate wellness, cardiac rehabilitation, or biomechanics. Approved internship sites are listed below (See page 37). Besides these sites, students may satisfy an internship requirement at other facilities which they may identify, with permission of the student's faculty advisor, and provided the facility meets basic program requirements and agrees to enter into an internship affiliation agreement with the University. This process may take several months. Therefore, initiate inquiries six months before the desired starting date.

 **Strength and Conditioning Internships:** By the time you finish both internships you must have completed all the required competencies on the Strength and Conditioning Internship Competency Checklist (Page 35 in this Handbook). While completing your two internships at two different sites is preferable, you can complete both internships at the same site as long as you can do at least 448 hours, all the Required Competencies, and at least 10 of the Optional Competencies at that site.

 EXS 6950 - Getting an internship is a competitive process. Due to the large number of requests for a limited number of internship positions at these sites, it is recommended that students contact the internship coordinator at the desired site **at between six and three months prior to the initiation of the internship**. It is recommended that you start looking for an Internship site early so that you are assured of a spot to do your Internship during the semester of your choice.  Internship coordinators are busy people and tend not to respond to phone or email inquiries from potential interns. Thus, it is recommended that you actually go to the potential Internship sites all dressed up as if you were going to a job interview, with your resume, your Oakland Grades (SAIL copy is fine), and a copy of the MS in EXS Handbook.  If you can interview for the Internship right then and there, great!  If not, you can set up an appointment to come back later to talk to the intern supervisor.  It is best to go to several possible sites to maximize your chances of getting offered an Internship. See the Exercise Science Program Director for suggestions for alternative internship sites if you are having difficulty securing a site for EXS 6950.

 EXS 6955 - The second internship (EXS 6955) can be taken at the same site as used for EXS 6950 or a comparable site at a different location. Approved internship sites are listed below (See page 37). Besides these sites, students may satisfy an internship requirement at other facilities which they may identify, with permission of the student's faculty advisor, and provided the facility meets basic program requirements and agrees to enter into an internship affiliation agreement with the University. This process may take several months. Therefore, initiate inquiries six months before the desired starting date.

 **PLEASE NOTE:**

 Students of the University shall not be deemed to be employees of the internship site for purposes of compensation, fringe benefits, workers' compensation, unemployment compensation, minimum wage laws, income tax withholding, social security or any other purpose, because of their participation in the educational program. Each student is placed with the site to receive internship experience as a part of his or her academic curriculum; those duties performed by a student are not performed as an employee, but in fulfillment of these academic requirements and are performed under supervision. At no time shall students replace or substitute for any employee of the Agency. This provision shall not be deemed to prohibit the employment of any such student by the Internship site under a separate employment agreement.

 **SPECIFIC REQUIREMENTS FOR COMPLETION**

 **of M.S. in EXERCISE SCIENCE INTERNSHIPS**

 Completion of the total internship component of the degree requires all of the following:

 1) Satisfactory completion ("S" grade) of at least 224 hours of internship in EXS 6950 at an approved internship site.

 2) Satisfactory completion ("S" grade) of at least 224 hours of internship in EXS 6955 at an approved internship site.

PLEASE NOTE: The grade for each internship will not be assigned until your EXS faculty advisor has received two evaluation forms: "Evaluation of Student Performance" completed by the Internship site supervisor; and "Evaluation of Internship Site" completed by the student.

 3) Submission of a detailed daily diary of internship activities completed during each internship. As student interns, you should record, on a daily basis, the nature of your activities and the number of clients/patients and/or procedures completed. Your diary is to be submitted to your EXS advisor as a part of your final report for each internship.

 4) Submission, to your EXS advisor, of a **Final Report** for each internship. The final report should list and describe observations, learning activities and technical skills associated with your internship. The competency checklist is one of the components of the final report.

 5) Submit to your EXS advisor a completed **Competency Checklist**. The checklist is not considered complete until **all items** in the Essential Competencies, and **10 items** from the Optional Competencies have been initialed by an authorized evaluator. You should be aware that you may need to put in time, beyond the minimum 448 hours, to acquire these competencies.

 An approved Evaluator must initial each item when it is determined that the competence has been demonstrated. Approved Evaluators are the internship site supervisors (or designees) and Exercise Science faculty. Students should always keep a photocopy of the initialed checklist in case it is lost.

 **Rules for Students while at Internship Sites**

 A. Prior to beginning the affiliation, students should contact the Internship Site Director if they are unsure of any of the details of the rotation.

 B. Students must provide their own transportation to/from assigned internship sites.

 C. Students are expected to be well groomed and in appropriate uniform. Each facility will specify what is and is not appropriate dress.

 D. Professional Conduct - At all times the student is expected to:

 1. Follow the rules and regulations of the internship site (e.g., working hours, billing procedures, dress code, preparation of activity area, etc.).

 2. Comply with the ethical standards of the internship site and Oakland University.

 3. Conduct himself/herself in a professional manner in regard to both patients/clients and staff.

 4. Respect the integrity and rights of all persons.

Noncompliance with any of the proceeding will be taken into account in the student's evaluation. Noncompliance can result in dismissal from the affiliation and/or an unsatisfactory grade.

E. While at the internship site, it is the student's responsibility to complete all assignments as requested by the Internship Site Director, including, but not limited to, readings, in-service presentations, initial, progress and discharge notes, home programs, etc.

F. While at the internship site, the student is responsible for familiarizing himself/herself with and following all policies and procedures of the facility. This includes, but is not limited to, those policies and procedures dealing with scheduling, billing, note-writing, use of medical terminology, referrals to other disciplines within and outside of the facility, evaluation and exercise program protocol.

G. Students are expected to attend all internship sessions and absences are to be considered the exception rather than the rule.

 1. Excused Absences - Illness and emergencies (such as a death in the family) fall in this category. In order to be excused, the student must call the Internship Site Director. When participating in internship experiences, students must consider the health of those with whom they come in contact. If (and only if) the student feels he/she has an illness that may be harmful to patients/clients, he/she should not participate in the internship experience for that day. A limited number of excused absences will be allowed during an internship rotation, after which make-up time will have to be scheduled.

 2. Unexcused Absences - Any absence of which the Internship Site Director has not been notified is considered unexcused. Such absences require make-up time.

 3. Under no circumstances are students to be absent from academic classes to make up time missed from internship.

 4. Students will not be excused from internship for vacations, honeymoons, family functions, etc.

 5. Tardiness is not an acceptable practice in internship. If a student is habitually tardy, make-up time will be required. In extreme cases, failure may result.

 EVALUATION OF STUDENTS

 A. Students will be evaluated by their Internship Site Directors using the Evaluation of Student Internship Performance form.

B. In the event that a student is experiencing problems during his/her affiliation, the student should first discuss them with the Internship Site Director. If the problems remain unresolved, the student should then discuss them with the Exercise Science Program Director. The Program Director will, in turn, take them up with the Internship Site Director.

C. Site visits may be made by the Exercise Science program to the internship sites. Telephone contact between the student's advisor and the Internship Site Director will also be routinely initiated to check on the progress of students.

 STUDENT EVALUATION OF INTERNSHIP SITES

 A. Students will formally evaluate the internship site immediately prior to the completion of the affiliation.

 COMPLETING THE INTERNSHIP

 A. For EXS 6950, once all the competencies have been completed that are possible to complete at that site, and at least 224 hours have been completed, make an appointment to meet with the Program Director of the Exercise Science Program. Bring your daily diary, your evaluation of the internship site, your final report (a summary of your learning experiences), and your Competency Checklist with you to the meeting. Make sure that the internship site supervisor has completed and submitted his/her evaluation of your performance to the Exercise Science Program Director prior to this meeting. This can either be mailed to the Exercise Science Program Director or it can be sealed in an envelope with the initialed Competency Checklist, signed over the seal, and given to you to bring to the exit interview with the Program Director. The Program Director will review all these materials with you and determine a grade to be submitted for EXS 6950.

 B. For EXS 6955, once all the competencies on the Competency Checklist have been completed, and at least 224 hours have been completed at the EXS 602 site, make an appointment to meet with the Program Director of the Exercise Science Program. Bring your daily diary, your evaluation of the internship site, your final report (a summary of your learning experiences), and your competency checklist with you to the meeting. Make sure that the internship site supervisor has completed and submitted his/her evaluation of your performance to the Exercise Science Program Director prior to this meeting. This can either be mailed to the Exercise Science Program Director or it can be sealed in an envelope with the initialed Competency Checklist, signed over the seal, and given to you to bring to the exit interview with the Program Director. The Program Director will review all these materials with you and determine a grade to be submitted for EXS 6955.

 **OAKLAND UNIVERSITY**

 **School of Health Sciences**

 **EXERCISE SCIENCE PROGRAM**

 **PROGRAM DIRECTOR’S CHECK LIST**

 STUDENT'S NAME:

 Give this form to the Exercise Science Program Director before starting your first internship (EXS 601).

 ***Before approval is given to begin an internship***

 ***the student should present evidence of:***

 EXS 6950 EXS 6955

 Current Health Insurance coverage

 Current CPR Certification

 Recent Medical Examination

 Hepatitis B Vaccination (or declination)

 ***After completion of the internship:***

 Duration (at least 224 hrs)

 Received evaluation of student performance

 from internship site

 Received evaluation of internship site

 from student

 Submission of detailed daily diary

 Submission of final report

 Submission of competency checklist

 Interim Complete

 Satisfactory completion of internship

 Exit interview with student upon completion

 (for review of performance)

 **OAKLAND UNIVERSITY**

 **School of Health Sciences**

 **EXERCISE SCIENCE PROGRAM**

 **INTERNSHIP COMPETENCY CHECKLISTS**

 Every student pursuing the MS in Exercise Science degree is required to complete two internships. The student will complete both internships in clinical and non-clinical exercise science settings **OR** complete both internships in strength and conditioning settings. It is expected that, during these internships, the student will become competent in applying exercise science principles in primary and secondary disease prevention or in strength and conditioning for human performance enhancement. The internship competency checklists are designed to be completed over the duration of **BOTH** exercise science internships, combined.

 It is the student's responsibility to insure that all competencies are demonstrated. The site director at the student's second internship site may wish to review the checklist at the beginning of the internship to determine which competencies remain to be demonstrated. This may help in planning internship activities.

 1. Each student is required to complete **ALL** of the competencies listed in the essential competencies section, and **10 items** from the optional competencies section by the end of the second internship.

 2. An approved evaluator (internship site director or designee) must initial each item when it is determined that the competency has been satisfied.

 3. This completed COMPETENCY CHECKLIST must be presented to the student's EXS advisor with the final report for EXS 6955.

Student's name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Semester:\_\_\_\_\_\_20\_\_\_\_\_

**CLINICAL AND NON-CLINICAL INTERNSHIP COMPETENCY CHECKLIST (page 1)**

Students in a clinical and non-clinical internship must complete all items in section A – Essential Competencies and at least 10 items in section B – Optional Competencies. The internship supervisor should initial beside each competency when it is satisfactorily completed. The initialed competency checklist must be presented to the Exercise Science Program Director after the internship during the exit interview.

 **A. Essential Competencies (all on this list are to be completed)**

 **Professionalism and Ethics**

1\_\_\_\_\_ **Professional, ethical and legal competence.** Demonstrate professional behavior, maintain patient/client confidentiality, recognize and accept personal/professional limitations, engage in constructive self-change, serve as a health role model for patients/clients, demonstrate concern for patient/client privacy, modesty and anxiety, maintain confidentiality of patient/client information, accept personal, cultural and professional diversity in working for positive change, follow legal and ethical guidelines for patient/client management and referral.

2\_\_\_\_\_ **Interpersonal and communication skills.** Interact appropriately with health care professionals and with the client/patient. Demonstrate effective counseling and communication skills to facilitate behavior change

 **Teaching**

 3\_\_\_\_\_ **Participate in health promotion/lifestyle change consultations** with increasing responsibility

 4\_\_\_\_\_ **Administer Health Risk Appraisals**, contribute to consultation. (minimum 5x)

 5\_\_\_\_\_ **Diet and exercise planning**, attend nutritional counseling (minimum 5x)

6\_\_\_\_\_ **Lead group exercise** including demonstration of various techniques for clients with various fitness levels. (minimum 10x)

 7\_\_\_\_\_ **Conduct individual exercise sessions**. (minimum 10x)

 8\_\_\_\_\_ **Instruct participants in using equipment and in test procedures**. (minimum 10x)

9\_\_\_\_\_ **Conduct special intervention programs** (such as cardiac rehabilitation, obesity management, seniors exercise, women only, diabetes management, stress management, smoking cessation, sports rehabilitation, health maintenance/improvement). (minimum 10 hrs)

 **Evaluation Procedures**

10\_\_\_\_\_\_ **Perform patient/client evaluation** procedures: routine screening, contraindications, explain protocol, informed consent, summarize information for professional staff. (minimum 20x)

 11\_\_\_\_\_ **Assess muscular strength and endurance**. (minimum 10x)

 12\_\_\_\_\_ **Assess cardiorespiratory fitness**. (minimum 30x)

 13\_\_\_\_\_ **Design/supervise isotonic/isokinetic resistance exercise**. (minimum 10x)

 14\_\_\_\_\_ **Assess flexibility**. (minimum 10x)

15\_\_\_\_\_ **Assess body composition**: skinfolds or Bod Pod preferred but Bioelectric Impedance or BMI acceptable. (min 20x)

 16\_\_\_\_\_ **Know when to stop an individual from exercising** based on A.C.S.M. criteria.

 - stress tests as technician (minimum 30x)

 - stress tests as supervisor (minimum 10x)

 - exercise sessions as supervisor (minimum 10x)

 17\_\_\_\_\_ **Obtain/interpret electrocardiograms, and use in exercise prescription**

 - resting ECGs (minimum 10x)

 - exercise ECGs (minimum 10x)

 18\_\_\_\_\_ **Summarize and interpret test data, prescribe exercise**

 - for healthy individuals (minimum 20x)

 - for individuals with stable disease (minimum 20x)

 **Cardiovascular/Respiratory Competencies**

19\_\_\_\_\_ **Understand cardiovascular, respiratory and musculo-skeletal pathologies** commonly encountered in both clinical and non-clinical exercise science settings.

**CLINICAL AND NON-CLINICAL INTERNSHIP COMPETENCY CHECKLIST (page 2)**

20\_\_\_\_\_ **Modify patient/client exercise program**. Post-CABG, MI, PTCA, heart transplant, COPD, PVD, diabetes, obesity, renal disease, and common neuromuscular and orthopedic conditions (minimum 5x)

21\_\_\_\_\_ **Place resting and exercise ECG electrodes for 12-lead ECGs**. (minimum 15x)

22\_\_\_\_\_ Demonstrate ability to **minimize ECG artifacts**.

23\_\_\_\_\_ **Record and use blood pressure for exercise prescription**: at rest & during exercise (min. 30x)

24\_\_\_\_\_ **Use of RPE, dyspnea and/or angina scales**. (minimum 10x)

25\_\_\_\_\_ **Conduct different stress test protocols** under supervision. (minimum 3 of each of 3 protocols)

26\_\_\_\_\_ Given a **clinical case study**, devise supervised exercise programs for the first 6 weeks and 3 months after hospitalization for MI, PTCA or CABG. (minimum 5x)

**Emergency Procedures**

27\_\_\_\_\_ **Know first aid, emergency procedures and evacuation plans** during exercise testing, evaluation, and exercise sessions

28\_\_\_\_\_ Demonstrate competency in **verifying and maintaining operating status of emergency equipment.**

 **B. Optional Competencies (10 items from this list are to be completed)**

 1\_\_\_\_\_ Present 30 minute seminar related to primary or secondary disease prevention at internship site.

 2\_\_\_\_\_ Present 30 minute seminar related to internship in OU course (with instructor permission).

 3\_\_\_\_\_ Counsel at-risk clients about exercise (e.g., pregnant, diabetic, arthritic, etc.)

 4\_\_\_\_\_ Serve as small group discussion leader for patients/clients or peers.

 5\_\_\_\_\_ Provide personal training experiences for clients (with increasing responsibility). (minimum 5x)

 6\_\_\_\_\_ Counsel clients on stress management. (minimum 5x)

 7\_\_\_\_\_ Develop and administer educational programs or materials.

 8\_\_\_\_\_ Attend a professional conference/meeting related to your internship

 9\_\_\_\_\_ Create records for participant exercise adherence and retention.

10\_\_\_\_\_ Help in planning an actual corporate wellness program, or design a mock corporate wellness program after visiting a successful corporate program in progress.

 11\_\_\_\_\_ Assist in interpreting medical information from patient charts. (minimum 10x)

12\_\_\_\_\_ Review medical history with a clinician (ACSM certified Exercise Specialist, physician, or nurse clinician). (minimum 5x)

13\_\_\_\_\_ Modify exercise programs for: elderly, differing fitness levels, acute illness, asthma, allergies, hypertension, obesity, low back pain etc. (minimum 5x)

 14\_\_\_\_\_ Testing and prescribing exercise for children. (minimum 5x)

 15\_\_\_\_\_ Calibrate exercise testing equipment. (minimum 3x)

16\_\_\_\_\_ Perform a screening interview for alcohol, tobacco or other substance abuse, and provide appropriate health information and counseling/referral. (minimum 5x)

 17\_\_\_\_\_ Counsel/refer clients regarding overuse injuries. (min 10x)

 18\_\_\_\_\_ Assist in administration/interpretation of thallium or radionuclide exercise stress tests. (min 5x)

 19\_\_\_\_\_ Measure oxygen consumption during exercise test. (min 5x)

 20\_\_\_\_\_ Supervise resistance training in cardiac patients, appropriately modify program. (minimum 10x)

 21\_\_\_\_\_ Telemetry of ECG during exercise. (minimum 5x)

 22\_\_\_\_\_ Arm ergometry testing & exercise prescription based on the tests. (minimum 5x)

23\_\_\_\_\_ Attend supplementary lectures on psychological, behavioral or physical topics that pertain to exercise, health or disease. (minimum 3x)

 24-30 Participation in programs not included in item 9 of the Essential Competencies:

 24\_\_\_\_\_ Participate in corporate testing program. (minimum 10 hrs)

 25\_\_\_\_\_ Participate in smoking cessation program. (minimum 10 hrs)

 26\_\_\_\_\_ Participate in stress management program. (minimum 10 hrs)

 27\_\_\_\_\_ Participate in obesity management program. (minimum 10 hrs)

 28\_\_\_\_\_ Participate in senior's exercise program. (minimum 10 hrs)

 29\_\_\_\_\_ Participate in athlete's exercise program. (minimum 10 hrs)

 30\_\_\_\_\_ Participate in children's exercise program. (min 10 hrs)

 31\_\_\_\_\_ Student's own objective(s) (must be attached)

 Date #31 approved by evaluator:\_\_\_\_\_-\_\_\_\_\_-20\_\_\_\_\_

**OAKLAND UNIVERSITY**

**School of Health Sciences**

**EXERCISE SCIENCE PROGRAM**

**STRENGTH & CONDITIONING INTERNSHIP COMPETENCY CHECKLIST (page 1)**

Student's name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Semester:\_\_\_\_\_\_Year:\_\_\_\_\_

Students in a strength and conditioning internship must complete all items in section A – Essential Competencies and at least 5 items in section B – Optional Competencies. The internship supervisor should initial beside each competency when it is satisfactorily completed. The initialed competency checklist must be presented to the Exercise Science Program Director at the end of the internship during the exit interview.

**A. ESSENTIAL COMPETENCIES (ALL ARE TO BE COMPLETED)**

**Professionalism and Ethics**

 1\_\_\_\_\_ **Demonstrate Professional, ethical and legal competence.** This includes: demonstrate professional behavior; maintain client confidentiality; recognize and accept personal/professional limitations; engage in constructive self-change; serve as a health role model for clients; demonstrate concern for client privacy, modesty and anxiety; maintain confidentiality of client information; accept personal, cultural and professional diversity in working for positive change; follow legal and ethical guidelines for client management and referral.

 2\_\_\_\_\_ **Use appropriate interpersonal and communication skills** including: interact appropriately with health care professionals and with the client; demonstrate effective counseling and communication skills to facilitate behavior change

**Teaching**

3\_\_\_\_\_ **Participate in client exercise, fitness, sport performance briefings/consultations with**

 **increasing responsibility** (minimum 5x)

4\_\_\_\_\_ **Instruction in power lifts,** including guiding, assisting, correcting, and adjusting exercise activities, and demonstration of correct techniques for clients of various fitness levels. (min. 20x)

5\_\_\_\_\_ **Conduct individual exercise sessions,** including guiding, assisting, correcting, and adjusting exercise activities. (minimum 20x)

6\_\_\_\_\_ **Instruction in the use of exercise equipment,** addressing safety and effectiveness issues, spotting, and equipment adjustment for proper fit and load. (minimum 20x)

7\_\_\_\_\_ **Instruction in Olympic lifts,** including guiding, assisting, correcting, and adjusting exercise activities, and demonstration of correct techniques for clients of various fitness levels. (min. 20x)

8\_\_\_\_\_ **Equipment, test procedure instruction.** 1RM, anaerobic power, agility, speed, etc. (prefer min. 5x)

9\_\_\_\_\_ **Contribute to, or conduct special intervention programs** (such as plyometric, agility, power,

 children’s exercise, senior’s exercise, sport specific training, etc.). (minimum 10 hrs)

**Evaluation Procedures**

10\_\_\_\_\_ **Perform client evaluation procedures:** routine screening, contraindications, explain test protocol, informed consent, summarize information for strength and conditioning professional. (min. 25x)

11\_\_\_\_\_ **Assess muscular strength and/or endurance,** by field, or laboratory procedures. (prefer min. 10x)

12\_\_\_\_\_ **Assess cardiorespiratory fitness,** by sub-maximal or maximal field procedures. (prefer min. 5x)

13\_\_\_\_\_ **Assess flexibility,** using field tests, flexometer, or goniometer. (prefer minimum 5x)

14\_\_\_\_\_ **Assess power.** (prefer minimum 10x)

15\_\_\_\_\_ **Assess agility.** (prefer minimum 10x)

16\_\_\_\_\_ **Assess heart rate at rest and during exercise.** Insure that you demonstrate competence in palpating radial and carotid pulse manually, and in the use of various electronic devices to measure heart rate. (minimum 10x each resting and exercising)

**STRENGTH & CONDITIONING INTERNSHIP COMPETENCY CHECKLIST (page 2)**

17\_\_\_\_\_ **Demonstrate ability to evaluate and appropriately stop an individual from exercising** based on American College of Sports Medicine or National Strength and Conditioning Association criteria.

 - during fitness tests under supervision (minimum 5x)

 - during fitness tests as supervisor (minimum 5x)

 - during exercise sessions as supervisor (minimum 10x)

**Exercise Programming**

18\_\_\_\_\_ **Summarize and interpret fitness test data and prescribe a strength and conditioning**

 **exercise program** for healthy individuals (minimum 20x)

19\_\_\_\_\_ **Summarize and interpret fitness test data and prescribe a resistance exercise program for**

 **strength, endurance and/or power** for healthy individuals (minimum 20x)

20\_\_\_\_\_ **Implement/Guide training for clients.** Observe first, and progressively increase responsibility

 under supervision. (minimum 20x)

21\_\_\_\_\_**Modify client exercise program.** Observe first, and progressively increase responsibility under

 supervision. (minimum 20x)

22\_\_\_\_\_ **Incorporate sport-specific elements into the training** (minimum 40x)

**Emergency Procedures**

23\_\_\_\_\_ **Know first aid and emergency procedures** during exercise testing, evaluation, and exercise sessions

**B. OPTIONAL COMPETENCIES (A MINIMUM OF 10 ITEMS ARE TO BE COMPLETED)**

1\_\_\_\_\_ Present 30 minute exercise-related topic at practicum site or in an OU course.

2\_\_\_\_\_ Counseling at-risk clients about exercise (minimum 10 hrs)

3\_\_\_\_\_ Small group discussion leader - exercise-related topic

4\_\_\_\_\_ Develop and administer educational programs or materials.

5\_\_\_\_\_ Lead group exercise (for example: boot camp) (10x)

6\_\_\_\_\_ Diet and exercise planning, attend nutritional counseling (minimum 5x)

7\_\_\_\_\_ Exercise programs for female athletes to prevent ACL problems (minimum 10x)

8\_\_\_\_\_ Conduct specialized exercise test protocols under supervision. (minimum 3x)

9\_\_\_\_\_ Adjust exercise program based on injury or medical history. (minimum 5x)

10\_\_\_\_\_ Modify exercise programs for: elderly, differing fitness levels, etc. (minimum 5x)

11\_\_\_\_\_ Testing and prescribing exercise for children. (minimum 5x)

12\_\_\_\_\_ Calibrate exercise testing equipment. (minimum 3x)

13\_\_\_\_\_ Counsel/refer clients regarding overuse injuries. (minimum 10x)

14\_\_\_\_\_ Instruct in use of special exercise apparatus (eg. Smith machine, stability balls, Bosu balls,

 suspension training, etc.) (minimum 5x)

15\_\_\_\_\_ Measure oxygen consumption during exercise test. (minimum 5x)

16\_\_\_\_\_ Arm ergometry testing & exercise prescription. (minimum 5x)

17\_\_\_\_\_ Attend supplementary lecture or professional conference. (minimum 3x)

**Participation in programs not included in item 9 of the Essential Competencies:**

18\_\_\_\_\_ Participate in a football training program. (minimum 10 hrs)

19\_\_\_\_\_ Participate in a basketball training program. (minimum 10 hrs)

20\_\_\_\_\_ Participate in a track training program. (minimum 10 hrs)

21\_\_\_\_\_ Participate in a swimming training program. (minimum 10 hrs)

22\_\_\_\_\_ Participate in a volleyball training program. (minimum 10 hrs)

23\_\_\_\_\_ Participate in a baseball training program. (minimum 10 hrs)

24\_\_\_\_\_ Participate in a soccer training program. (minimum 10 hrs)

25\_\_\_\_\_ Participate in a tennis training program (minimum 10 hrs)

26\_\_\_\_\_ Student's own objective(s) (must be attached) approved by supervisor \_\_\_\_\_\_\_\_

**APPROVED INTERNSHIP SITES**

**Athletic Republic Midland** (989) 923-1952

2205 Jefferson St.

Midland, MI 48640

Type: strength and conditioning, sport specific training

 **Botsford General Hospital Cardiac Rehabilitation** (248) 471-8953 Fax: (248) 471-8555

 2 West Cardiology

 28050 Grand River Avenue, Farmington Hills, MI 48336-5933

 Type: Stress testing (including stress echocardiography, nuclear, cardio-pulmonary, and pharmacological stress testing), cardiac rehabilitation (phases II, III, IV), pulmonary rehabilitation, and outpatient wellness, exercise and physical therapy programs at the Wellness Center (see next entry). Prepares students to take the ACSM Exercise Specialist exam.

 **Center for Integrated Therapy** (248) 922-5617

 7650 Dixie Highway

 Clarkston, MI 48346

 Type: Orthopedic spinal rehabilitation, complementary and alternative medicine,

 wellness, surgical observation, clinical research.

**Cooper Institute** (800) 635-7050 (972) 341-3242

 12330 Preston Rd., Dallas, TX 75230

 Type: Preventive medicine center, corporate fitness, wellness

**Crittenton Hospital – Cardiopulmonary Rehabilitation** (248) 652-5259

 1101 W. University Dr., Rochester, MI 48309

 Type: Cardiac rehabilitation (phase I, II, III), pulmonary rehabilitation

**D1 Detroit** (248) 333-1910

799 Denison Ct.

Bloomfield Township, MI 48302

Type: strength and conditioning, sport specific training

**Detroit Athletic Club** (313) 442-1081

 241 Madison, Detroit, MI

 Type: Strength & Conditioning, fitness, general population

**Detroit Skating Club** (248) 332-3000

888 Denison Court

Bloomfield Hills, MI 48302

Type: Strength and conditioning, sport specific training

**Domino’s Farms - Preventive Cardiology at MedSport** (734) 998-5667

 24 Frank Lloyd Wright Drive,

 Lobby A, Ann Arbor, MI 48106-0363

 Type: Cardiac rehabilitation (phases II and III), stress testing, observe in-hospital cardiac procedures, stress echocardiography, prep for ACSM CCES certification.

 Details: <http://www.med.umich.edu/cvc/services/site_preventive/healthprof_intern.html>

**DMC Fitness Center** (313) 745-9748

261 Mack Avenue

Detroit, MI 48201

Type: Health promotion/wellness, corporate fitness, personal training

**Dynamic Rehabilitation Centers, Inc.**  (248) 649-2323 Ext. 127

 1800 W. Big Beaver

 Troy, MI 48084

 Type: Back care, orthopedic rehabilitation

**FitnessQuest Training and Fitness Center** (248) 625-6022

32 South Main Street

Clarkston MI 48346

 Type: Fitness, personal training, orthopedic rehabilitation, sport-specific training

**Franklin Fitness & Racquet Club** (248) 352-8000

 29350 Northwestern Hwy.

 Southfield, MI 48034

 Type: Health promotion/wellness, corporate fitness, personal training

**Garden City Hospital Cardiac Rehabilitation** (734) 458-3242 (734) 458-3241

 6245 N. Inkster Rd., Garden City, MI 48135-2599

 Type: Cardiac rehabilitation (phases I, II, and III), stress testing.

**Genesys Athletic Club** (810) 606-7300

 801 Health Park Blvd.

 Grand Blanc, MI 48439

 Type: Health promotion/wellness and fitness, personal training

**Gotham Premier Personal Training** (248)731-7208

60 West Big Beaver Road, Ste. 100

Bloomfield Hills, MI 48302

 Contact: Mike Micene, [www.gothampermiertraining.com/](http://www.gothampermiertraining.com/),

 batman13ny@gothampremiertraining.com,

 Type: Health promotion/wellness and fitness, personal training

**Genesys Regional Medical Center – Cardiac Rehabilitation** (810) 606-5120

 Genesys Cardiac Rehab

Genesys Athletic Club (Attention: Laura O’Donnell)

 One Genesys Parkway

 Grand Blanc, MI 48439

 Type: Cardiac Rehabilitation and Prevention

**Great Lakes Athletic Club** (248) 393-3085

 3800 Baldwin Road

 Orion, MI 48359

 Type: Personal training, sport-specific training, fitness.

**Health Fitness Corporation (Regional Sites)**

 Chrysler CTC Health Activity Center (248) 576-2803

 800 Chrysler Drive, Auburn Hills, MI 48326

 Type: Corporate Fitness, Wellness

 GM SPO Fitness Center (810) 606-2348

 Mail Code 484-394-028

 6200 Grand Point Drive

 Grand Blanc, MI 48334

 Type: Corporate Fitness, Wellness

 UAW-Ford Ernest Lofton Fitness Center (313) 323-1852

 3001 Miller Road Fax (313) 845-3080

 Dearborn, MI 48121

**Henry Ford Heart & Vascular Institute – Cardiac Rehabilitation** (313) 972-1919

 William Clay Ford Center for Athletic Medicine

 6525 Second Avenue, Detroit, MI 48202

 Type: Cardiac rehabilitation (phase II & III), stress testing, health enhancement

 **Hills and Dales General Hospital** (969-912-6337)

6190 Hospital Drive, #101

Cass City, MI 48726

Type: General Health and Fitness facility, Wellness

**Hurley Health & Fitness Center** (810) 262-7898 Website: http://www.hurleymc.com/wellness

 411 E. 3rd Street

 Flint, MI 48503

Type: Community health and wellness; Corporate wellness; Fitness and exercise; Health education; Nutrition; Special Populations.

**Huron Valley-Sinai Hospital – Cardiac Rehabilitation** (248) 937-3606

 Cardiopulmonary Rehabilitation

 Huron Valley-Sinai Hospital

 1 William Carls Drive

 Commerce, MI 48382

 Type: Stress testing, cardiac and pulmonary rehabilitation (phases II and III), corporate health screening, observe heart surgery.

**Ingham Regional Medical Center** (517) 483-8413 Ext. 3513 (517)483-7550

 Thoracic and Cardiovascular Institute

 405 W. Greenlawn, Suite 400

 Lansing, MI 48910

 Type: Cardiac rehabilitation (phase II & III), stress testing, health enhancement

**Johnson & Johnson Health Management, Inc**. **(Regional Sites)** (989) 636-325

 Dow Chemical Company Fitness Center 6

 EDC Building, Room 21

 Midland, MI 48674

 Type: Corporate Fitness/Wellness

**Lutheran General Hospital** (847) 723-8745

 1875 Dempster St., Parkside Blvd., Ste. 160

 Park Ridge, IL 60068

 Type: Cardiac rehabilitation - Phase I, II, III. Fitness/wellness.

**Macomb Family YMCA** (586) 468-1411 x223

 10 N. River Road, Mt. Clemens, MI 48043

 Type: Health promotion, personal training, fitness, wellness

**Michigan Heart at St. Joseph Mercy Hospital** (734) 483-5000

 200 Arnet St., Suite 110

 Ypsilanti, MI 48198

 Type: Cardiac rehabilitation - Phases I, II, III, health promotion/wellness

**Mount Clemens Regional Medical Center**, **Cardio-Pulmonary Rehab.** (586) 493-3354

 1000 Harrington Blvd., Mt. Clemens, MI 48043

 Type: Cardiac rehabilitation - Phases I, II, III

**MoveStrong** (248) 601-6683

 1135 West University Drive, Suite 450, Rochester Hills, MI 48307

 Type: Medically-based health and fitness

**Munson Medical Center,** **Cardiac Prevention and Rehabilitation** (231) 935-6201

 1105 Sixth Street, Traverse City, MI 49684 Mary McManemy

Type: Cardiac rehabilitation - Phases I, II, III, mmcmanemy@mhc.net

 health promotion/wellness, corporate fitness

**North Oakland Family YMCA** (248) 370-9622

 3378 E. Walton Blvd.

 Auburn Hills, MI 48236

 Type: Health promotion, personal training, fitness, wellness

**Oakwood Cardiac Rehabilitation Center** (313) 561-6400

 22060 Beech, Suite 100, Dearborn, MI 48124

 Type: Cardiac rehabilitation (phase I - III), pulmonary rehabilitation, stress testing.

**Oakland University – Campus Recreation** (248) 370-4910

 Campus Recreation Center, Wellness/fitness Programs

 Intern Director: Becky Lewis, M.S.

 Type: Health promotion/wellness, personal training,

 fitness assessment, exercise programming, seniors exercise.

**Oakland University – Strength and Conditioning** (248) 370-2643

 Department of Athletics, Strength and Conditioning Programs

 Intern Director: Dr. Todd Wohlfeil, DPT, Director of Strength and Conditioning

 Type: Athletic training (it is preferred that you take EXS 503 – Human

 Performance Enhancement before starting this internship)

**Older Person's Commission** (248) 659-1021

 Health and Wellness Department

 650 Letica Drive

 Rochester, MI 48307

 Type: Health promotion/wellness, personal training,

 fitness assessment, exercise programming, seniors exercise.

**Preventive Medicine Research Institute** (415) 332-2525

 900 Bridgeway, Suite 1, Sausilito, CA 94965

Type: Primary prevention, nutrition, health education, cardiac rehabilitation

**Pritikin Longevity Center** (305) 935-7131 www.pritikin.com

 8755 NW 36th Street,

 Miami, FL 33178

Type: Primary prevention, nutrition, health education**,**

personal training, psycho-social counseling, stress testing.

**Presbyterian Villages of Michigan** (248)334-4379

 The Village of Oakland Woods

 420 South Opdyke Road

 Pontiac, MI 48341-3145

 Type: Fitness/Wellness in Seniors facility

**Pulse Fitness** (248) 579-0363

616 N. Main Street

Royal Oak, MI 48067

Type: health club, personal training

**Romeo Plank Diagnostic Center** (586) 226-6226

 46591 Romeo Plank Road, Suite 137

 Macomb, MI 48044

 Type: Non-invasive and nuclear medicine stress testing.

**Snap Fitness** (586) 601-5335

26110 Crocker Blvd.

Harrison Township, MI 48045

Type: health club, personal training

**South Oakland Family YMCA** (248)547-0030

 1016 W. Eleven Mile Rd

 Royal Oak, MI 48067

 Type: Health promotion, personal training, fitness, wellness

**Sparrow Michigan Athletic Club** (517) 364-8888

 Sparrow Health Science Pavilion,

 2900 Hannah Boulevard, East Lansing, MI 48823

 Type: Health promotion/wellness, corporate fitness, personal training, sports medicine, biomechanical analysis

**St. John Providence Health System Oakland Hospital** (248) 967-7000 (and ask for Cardio-

 27351 Dequindre, Madison Heights, MI 48071 pulmonary Rehabilitation)

 Type: Cardiac Rehabilitation (phase II, III), stress testing.

**Starting Line Health and Fitness** (586) 770-6987

1771 W. Hamlin Road

Rochester Hills, MI 48309

Type: Personal training, strength and conditioning, sport-specific training

**Spectrum Health Hospitals – Cardiac Rehabilitation**  (616) 486-6577

 2902 Bradford Street NE

 Grand Rapids, MI 49525

 Type: Cardiac rehabilitation, stress testing, preventive cardiology.

**St. John Macomb Hospital – Cardiac Rehabilitation** (586) 573-5233

 12000 E. 12 Mile

 Warren, MI 48093 (North east corner of campus)

 Type: Cardiac rehabilitation (phases I to III), stress testing

**St. Joseph Mercy Hospital – Cardiac Rehabilitation** (248) 858-3128

 44405 Woodward Ave.,

 Pontiac, MI 48341

 Type: Cardiac rehabilitation (phases I to III), stress testing

**Strength Training and Recovery** (810)247-2102

 859 Health Park Blvd.

 Grand Blanc, MI 48439

 Type: Strength/conditioning and adaptive sports for those with neurological disorders

**Team Rehabilitation – Shelby Twp.** (586-884-6689)

50505 Schoenherr Road, Ste. 210

Shelby Twp., MI 48315

Type: Sports medicine, orthopedic rehabilitation, back care.

**The National Institute for Fitness and Sport** (317) 274-3432 Ext. 238 <www.nifs.org>

 250 University Boulevard,

 Indianapolis, IN 46202-5192

Type: Fitness assessment, health/wellness promotion,

 athletic performance enhancement, corporate fitness.

 $300 per month stipend is available. Application is available on the website.

**Total Performance Training Center** (248)608-0030

 1136 South Rochester Road

 Rochester Hills, MI 48307

 Type: Training for athletes, athletic performance enhancement

**Tweak: The Athletic Edge** (248) 593-1033

 2135 Cole Street

 Birmingham, MI 48009

 Type: Training for athletes, biomechanics, athletic performance enhancement

**2 SP Sports Performance** (248)397-8945

 29310 Stevenson Highway, Madison Heights, MI 48071

 Type: Strength/conditioning, training for athletes, athletic performance enhancement

**University of Detroit Mercy - Strength & Conditioning** (313) 912-2206

4001 W McNichols Road

Detroit, MI 48221-3038

Type: strength and conditioning, sport-specific training

**University of Michigan Hospital** (734)763-2554 Trish Mozdzierz

Pediatric Rehab Unit

1500 E. Medical Center Drive

Ann Arbor, Michigan 48109

**University of Michigan Medical Center** (734) 647-7888

 Health Promotion Division, **M-Health**

 3003 S. State Street, 2060 Wolverine Tower

 Ann Arbor, MI 48109-1281.

Type: Corporate fitness, health promotion, wellness, personal training, fitness testing. **(NOTE:** The Health Promotion Division of M-Fit operates numerous corporate fitness and health promotion sites in the metropolitan Detroit area.)

**University of Michigan – Physical Medicine and Rehabilitation** (734) 232-1201

 Laboratory for Physical Activity and Exercise Intervention Research

 Suite 3000, Burlington Building, 325 E. Eisenhower Pkwy.

 Ann Arbor, MI 48108

 Type: Children’s exercise. Obesity management. Older adult exercise

 programming. Work with special populations.

**Verizon Wireless** (248) 915-3427 fax (248) 915-3431

26935 Northwestern Hwy

Southfield, MI 48033

Type: Corporate fitness, personal training, wellness and health promotion

**Waltonwood Communities** (5 sites in Metropolitan Detroit area) (800) 250-7597

 Activities/Fitness Department

 3250 Walton Blvd.

 Rochester Hills, MI 48309

 Fitness Coordinator: Cassandra Spohn (cbourque@singhmail.com)

 Type: Seniors exercise, program planning, facility management, wellness

 counseling, program marketing.

**Wellness Institute, Health and Fitness Center** (231) 526-7773

 600 Highlands Dr.,

 Harbor Springs, MI 49740

 Type: Corporate wellness

**William Beaumont Hospital - Royal Oak – Cardiac Rehabilitation** (248) 655-5761

 Health Center, 4949 Coolidge Hwy.,

 Royal Oak, MI 48073

 Type: Cardiac rehabilitation (phase II and III), ACSM *Exercise Specialist*

 certification preparation

**William Beaumont Hospital – Troy - Cardiovascular Services** (248) 964-8521

 44201 Dequindre,

 Troy, MI 48085

 Type: Cardiac rehabilitation (phase II), stress testing, cardiac ultrasound,

 cardiac catheterization

**William Beaumont Hospital – SOLA Life & Fitness** (248) 267-5624 <http://www.solafitness.com>

 1555 South Blvd.,

 Rochester Hills, MI 48307

Type: Highly varied fitness/wellness; corporate; specialized individual and group programs; nutrition; rehabilitation.

**Xceleration** (586) 855-1929

3951 Joslyn Road

Auburn Hills, MI 48326

Type: Personal training, strength and conditioning, sport-specific training

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **This form is to be Completed by the Internship Site Supervisor at the End of the**

 **Internship and Submitted Directly to:**

|  |
| --- |
| **Charles R. C. Marks, Ph.D.** **DIRECTOR, EXERCISE SCIENCE PROGRAM** **SCHOOL OF HEALTH SCIENCES** **OAKLAND UNIVERSITY****433 Meadow Brook Dr.** **ROCHESTER, MICHIGAN 48309-4482** |

 **EVALUATION OF STUDENT INTERNSHIP PERFORMANCE**

Name of Student

Faculty Advisor

Internship Site

Supervisor Completing Evaluation

Report Period to

 MO/DAY/YR MO/DAY/YR

 Please evaluate the student according to the following categories. Space is also provided for written comments. Please cite specific examples that might clarify poor performance.

 **\*\* Circle the Appropriate Number\*\***

 **KNOWLEDGE OF FIELD**

 1. **Knowledge of Basic Sciences** (Integrates prior knowledge of basic science concepts and principles in a manner that is logical and consistent with sound clinical judgment).

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4** | **5** | **N/A** |
| **Poor** |  |  |  | **Excellent** |  |

Comments

 2. **Clinical Knowledge** (Demonstrates prerequisite clinical skills required for this internship).

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4** | **5** | **N/A** |
| **Poor** |  |  |  | **Excellent** |  |

Comments

3. **Ability in Evaluating Patient/Client Exercise Program** (Prescribes proper course or action consistent with medical orders or with client fitness level).

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4** | **5** | **N/A** |
| **Poor** |  |  |  | **Excellent** |  |

Comments

 4. **Technical Ability** (Possesses and demonstrates proficiency in manual skills necessary to perform all procedures required for this internship).

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4** | **5** | **N/A** |
| **Poor** |  |  |  | **Excellent** |  |

Comments

 **PERSONAL QUALITIES**

 1. **Acceptance of Administrative Responsibilities** (Maintains legible records, performs other routine administrative duties in a timely fashion).

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4** | **5** | **N/A** |
| **Poor** |  |  |  | **Excellent** |  |

Comments

 2. **Relations with Patient/Clients** (Maintains professional rapport, protects confidence, communicates effectively).

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4** | **5** | **N/A** |
| **Poor** |  |  |  | **Excellent** |  |

Comments

3. **Relations with Client Site Staff** (Works efficiently with staff and uses their skills appropriately).

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4** | **5** | **N/A** |
| **Poor** |  |  |  | **Excellent** |  |

Comments

 4. **Professional Attitude and Demeanor** (Gains and holds respect of patients/clients and colleagues alike - maintains positive attitude towards both learning new material and the delivery of services).

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4** | **5** | **N/A** |
| **Poor** |  |  |  | **Excellent** |  |

Comments

 5. **Response to Constructive Criticism** (Willingly accepts and applies corrective comments, admits mistakes and learns from them, doesn't repeat mistakes).

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4** | **5** | **N/A** |
| **Poor** |  |  |  | **Excellent** |  |

Comments

 6. **Leadership Capabilities** (Willingly accepts responsibility for patient/client care).

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4** | **5** | **N/A** |
| **Poor** |  |  |  | **Excellent** |  |

Comments

7. **Grooming and Appearance** (Conforms with dress code, looks and presents him/herself in a professional manner at all times.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4** | **5** | **N/A** |
| **Poor** |  |  |  | **Excellent** |  |

Comments

 **OTHER**

 1. **Progress in the Program** (Progressed satisfactorily at a rate consistent with others at his/her level).

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4** | **5** | **N/A** |
| **Poor** |  |  |  | **Excellent** |  |

Comments

 **OVERALL ASSESSMENT (Taking Everything Into Account)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4** | **5** | **N/A** |

 **OVERALL COMMENTS** (Please provide any other information that may not have been specifically asked for but is helpful in evaluating this student).

 (Date) (Supervisor's Signature)

 **This form is to be Completed by the Student and Submitted Directly to:**

|  |
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| **Charles R. C. Marks, Ph.D.** **DIRECTOR, EXERCISE SCIENCE PROGRAM** **SCHOOL OF HEALTH SCIENCES** **OAKLAND UNIVERSITY****433 Meadow Brook Dr.** **ROCHESTER, MICHIGAN 48309-4401** |

 **INTERNSHIP SITE EVALUATION**

Student Name: Date:

Faculty Advisor:

Internship Site:

 Circle One: **EXS 6950** **EXS 6955**

Semester of Enrollment in this course:

 Please rate the statements below on a scale of 1 through 5, using the following criteria:

1 = Strongly disagree

2 = Disagree

3 = Neither agree nor disagree

4 = Agree

5 = Strongly agree

 1. I received an adequate orientation to the facility.

 2. My supervisor possessed qualities I expected him/her to have as a health professional and student supervisor.

 3. I was given an appropriate amount of supervision.

 4. My objectives for this affiliation were met.

 5. I felt expectations of me were at my level.

 6. I was able to integrate the knowledge I gained in the classroom into the clinical environment.

7.\_\_\_\_\_ My academic preparation was adequate.

 8. I feel this was a valuable learning experience.

 9. I would recommend that students use this facility again.

Please provide a brief written evaluation of this clinical site, including the things you like most about it, the things you liked least about it, and how you feel it could be improved.

 **This form is to be Completed by the Internship Site Supervisor at the End of the**

 **Internship and Submitted Directly to:**

|  |
| --- |
| **Charles R. C. Marks, Ph.D.** **DIRECTOR, EXERCISE SCIENCE PROGRAM** **SCHOOL OF HEALTH SCIENCES** **OAKLAND UNIVERSITY****433 Meadow Brook Dr.** **ROCHESTER, MICHIGAN 48309-4482** |

 **EVALUATION OF STUDENT INTERNSHIP PERFORMANCE**

Name of Student

Faculty Advisor

Internship Site

Supervisor Completing Evaluation

Report Period to

 MO/DAY/YR MO/DAY/YR

 Please evaluate the student according to the following categories. Space is also provided for written comments. Please cite specific examples that might clarify poor performance.

 **\*\* Circle the Appropriate Number\*\***

 **KNOWLEDGE OF FIELD**

 1. **Knowledge of Basic Sciences** (Integrates prior knowledge of basic science concepts and principles in a manner that is logical and consistent with sound clinical judgment).

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4** | **5** | **N/A** |
| **Poor** |  |  |  | **Excellent** |  |

Comments

 2. **Clinical Knowledge** (Demonstrates prerequisite clinical skills required for this internship).

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4** | **5** | **N/A** |
| **Poor** |  |  |  | **Excellent** |  |

Comments

3. **Ability in Evaluating Patient/Client Exercise Program** (Prescribes proper course or action consistent with medical orders or with client fitness level).

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4** | **5** | **N/A** |
| **Poor** |  |  |  | **Excellent** |  |

Comments

 4. **Technical Ability** (Possesses and demonstrates proficiency in manual skills necessary to perform all procedures required for this internship).

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4** | **5** | **N/A** |
| **Poor** |  |  |  | **Excellent** |  |

Comments

 **PERSONAL QUALITIES**

 1. **Acceptance of Administrative Responsibilities** (Maintains legible records, performs other routine administrative duties in a timely fashion).

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4** | **5** | **N/A** |
| **Poor** |  |  |  | **Excellent** |  |

Comments

 2. **Relations with Patient/Clients** (Maintains professional rapport, protects confidence, communicates effectively).

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4** | **5** | **N/A** |
| **Poor** |  |  |  | **Excellent** |  |

Comments

3. **Relations with Client Site Staff** (Works efficiently with staff and uses their skills appropriately).

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4** | **5** | **N/A** |
| **Poor** |  |  |  | **Excellent** |  |

Comments

 4. **Professional Attitude and Demeanor** (Gains and holds respect of patients/clients and colleagues alike - maintains positive attitude towards both learning new material and the delivery of services).

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4** | **5** | **N/A** |
| **Poor** |  |  |  | **Excellent** |  |

Comments

 5. **Response to Constructive Criticism** (Willingly accepts and applies corrective comments, admits mistakes and learns from them, doesn't repeat mistakes).

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4** | **5** | **N/A** |
| **Poor** |  |  |  | **Excellent** |  |

Comments

 6. **Leadership Capabilities** (Willingly accepts responsibility for patient/client care).

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4** | **5** | **N/A** |
| **Poor** |  |  |  | **Excellent** |  |

Comments

7. **Grooming and Appearance** (Conforms with dress code, looks and presents him/herself in a professional manner at all times.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4** | **5** | **N/A** |
| **Poor** |  |  |  | **Excellent** |  |

Comments

 **OTHER**

 1. **Progress in the Program** (Progressed satisfactorily at a rate consistent with others at his/her level).

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4** | **5** | **N/A** |
| **Poor** |  |  |  | **Excellent** |  |

Comments

 **OVERALL ASSESSMENT (Taking Everything Into Account)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4** | **5** | **N/A** |

 **OVERALL COMMENTS** (Please provide any other information that may not have been specifically asked for but is helpful in evaluating this student).

 (Date) (Supervisor's Signature)

 **This form is to be Completed by the Student and Submitted Directly to:**

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 **INTERNSHIP SITE EVALUATION**

Student Name: Date:

Faculty Advisor:

Internship Site:

 Circle One: **EXS 6950** **EXS 6955**

Semester of Enrollment in this course:

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4 = Agree

5 = Strongly agree

 1. I received an adequate orientation to the facility.

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7.\_\_\_\_\_ My academic preparation was adequate.

 8. I feel this was a valuable learning experience.

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Please provide a brief written evaluation of this clinical site, including the things you like most about it, the things you liked least about it, and how you feel it could be improved.