

BA 395 – Graduate Internship in Management Information Systems

Course Syllabus

Course Description:

Internship of work experience in the field of concentration with evaluation by the employer and an academic advisor, a detailed report of the work to be submitted for grading (1-4 units).

Prerequisite: Records Office Permission

Grade: CR or NC only

Course Learning Objectives:

1. Demonstrate the mastery of completed MBA coursework in the concentration area.
2. Application of academic learning to the practical problems and situations of a business workplace.
3. Training in professional report writing under supervision.
4. Development of professional-level problem assessment skills, with experience in making professional recommendations.

Please note that a choice of a job under this internship course, and therefore the report's topic, must be related to the student's area of concentration.

You must work with a faculty advisor selected from the attached list. This advisor will require periodic consultations, no less than once a month during the semester, to keep aware of your progress and of the sufficiency of the work being done. Those contacts should be done face-to-face, or at the minimum by e-mail, so that the physical product of your efforts can be directly viewed and evaluated.

The below internship report format should be followed by all students, which will be used by your faculty advisor to assess your descriptive and analytical skills, and issue a grade for the course:

- Title Page
- Internship supervisor letter (employer)
- Table of Contents
- Table of Figures/Tables/Etc. if appropriate
- Section I: Introduction
 - a. Focus of the report
 - b. Description of the industry or field
 - c. Industry background and history
 - d. Company description and background
- Section II: My Role in the Company
 - a. Responsibilities
- Section III: Findings and Recommendations
- Bibliography
- Appendices

LINCOLN UNIVERSITY
401 FIFTEENTH STREET, OAKLAND, CA 94612
phone: (510) 628-8010 fax: (510) 628-8012

**BA 395 — GRADUATE INTERNSHIP IN
MANAGEMENT INFORMATION SYSTEMS
APPROVAL FORM**

NAME: _____
Last (Family) Name First (Given) Name Middle Name

STUDENT ID: _____ TERM: _____
Fall, Spring, Summer / Year

PROPOSED ADVISOR (See the attached list and select): _____

THE NUMBER OF INTERNSHIP UNITS FOR THIS SEMESTER: _____ UNITS

INTERNSHIP COMPANY NAME AND ADDRESS:

INTERNSHIP POSITION AND A BRIEF DESCRIPTION OF YOUR DUTIES:

STATE YOUR REASON(S) FOR AND OBJECTIVE(S) OF TAKING THIS INTERNSHIP:

STUDENT'S SIGNATURE: _____ DATE: _____

THE UNIVERSITY USE ONLY

Advisor's Signature: _____ Date: _____

Comments / Remarks: _____

Approved: Records Office _____ Date: _____

Graduate Internship Advisor List (Fall 2013)

BA 391 (International Business)	BA 392 (Finance Management)	BA 393 (General Business)	BA 394 (Human Resources Management)	BA 395 (MIS)
Dr. Sergey Aityan	Dr. Sergey Aityan	Dr. Sergey Aityan	Dr. Arthur Ashurov	Dr. Sergey Aityan
Dr. Alexander Anokhin	Dr. Marshall Burak	Dr. Alexander Anokhin	Dr. Pete Bogue	Dr. Walter Kruz
Dr. Arthur Ashurov	Dr. Aharon Hibshoosh	Dr. Arthur Ashurov	Dr. Marshall Burak	Prof. Serge Ruiz
Dr. Pete Bogue	Dr. Dorothy Sanford	Dr. Pete Bogue	Dr. Walter Kruz	Prof. Dan Sevall
Dr. Marshall Burak	Prof. Dan Sevall	Dr. Marshall Burak	Dr. Ken Germann	
Dr. Ken Germann		Dr. Ken Germann	Dr. Mike Guerra	
Dr. Mike Guerra		Dr. Mike Guerra	Dr. Bill Hess	
Dr. Aharon Hibshoosh		Dr. Aharon Hibshoosh		
Dr. Walter Kruz		Dr. Walter Kruz		
Dr. William Musgrave		Dr. William Musgrave		
Dr. Richard Rachlin		Prof. Dan Sevall		
Prof. Dan Sevall		Dr. Bill Hess		
Dr. Bill Hess				

Revised: August 13, 2013

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PROGRESS FORM**

STUDENT'S NAME (Last Name, First Name)

STUDENT I.D. NUMBER

TELEPHONE

E-MAIL

CURRENT TERM (Fall, Spring, Summer / Year)

PERIOD FOR INTERNSHIP

REPORT REVIEWER

Students should get their reviewer's initials below at each stage of the report's progress, and **submit it to the Admissions and Records Office at the appropriate times stated below (twice during the term)**. Failure to submit this form will result in the loss of the students' right to complete their reports, and the credit for the internship will not be given.

1. PROGRESS ON REPORT PREPARATION _____ DATE: _____

Please submit this form **before the end of March** (for Spring Semester) or **before the end of June** (for Summer Session) or **before the end of October** (for Fall Semester).

2. PERCENTAGE OF THE WORK DONE _____ % _____

3. REPORT IS COMPLETED, CONFIRMED BY THE REVIEWER _____

IF THE REPORT HAS **NOT BEEN COMPLETED BY THE END OF APRIL** (for Spring Semester) / **JULY** (for Summer Session) / **NOVEMBER** (for Fall Semester):

4. NO CREDIT WILL BE GIVEN TO THE STUDENT FOR THE INTERNSHIP IN THIS TERM

Please make the above confirmations **2 through 3 (or 4)** and submit this form **before the end of April** (for Spring Semester) or **before the end of July** (for Summer Session) or **before the end of November** (for Fall Semester).

REVIEWER'S SIGNATURE

STUDENT'S SIGNATURE

DATE

RECEIVED BY THE ADMISSIONS AND RECORDS OFFICE

1. _____ 2-3 (or 4). _____