

Internship portfolio

Student name		Student number	
Program*	Oncology / Cardiovascular Research		
Title			
Internship*	Minor / Major		
Institute*	Internal / External		
Date			

*please tick where appropriate

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- Digital Copy Report (send separately)**

Assessment forms of internships of the Faculty of Medicine VU

Summary

This portfolio contains all the forms required for the completion of an internship as part of the training program at the Faculty of Medicine VU. The student is advised to print the entire portfolio and use it as a guideline during the course of an internship.

During the internship, copies of the different forms must be sent to either masteroncology@vumc.nl (Master Oncology) or cvmaster@vumc.nl (Master Cardiovascular Research). At the end of the internship, the student must check all boxes on the first page of the portfolio and hand in the digital version of the complete portfolio via email to the above mentioned email addresses.

Time line

The student is responsible for contacting a department and requesting an internship placement. If the student is planning to perform an internship outside the VUmc, he/she is also responsible for contacting an internal VUmc supervisor.

When a department accepts the student for an internship, the following steps need to be taken:

1. Before starting the internship, the *Student* needs to ask for approval from the Examination Board via the digital **Approval Form**: [Forms - Vrije Universiteit Amsterdam \(vu.nl\)](https://forms.vrijeuniversiteit.nl)
Note: The student needs to have passed 3 out of the 4 compulsory courses before an internship can be approved or started.
2. The *Student* must also register the internship on VUnet.
3. The *Internship Assessor* needs to confirm the placement.
4. The *Examination Board* decides whether the internship will be approved.
5. When approval has been granted, the student is permitted to start the internship.
6. Within 2 weeks after the start of the internship, the *Student* hands in a copy of the **List of Agreements (A)** to either masteroncology@vumc.nl or cvmaster@vumc.nl.
7. After 6 weeks, the *Student* hands in a copy of the **Research Proposal (B)** and the **Interim Assessment (C)** to either masteroncology@vumc.nl or cvmaster@vumc.nl.
8. Halfway, the *Student* should give a **Presentation**.
9. At the end of the internship, the *Student* gives a **Final Presentation**, hands in the **Report**, and has the *Supervisor* and *Assessor* complete the digital **Assessment Form**:
<https://fd20.formdesk.com/onderwijscentrumVU/internshipOC/?get=1&sidn=0e2f17982e9d40db9b9b26531f228a3f>. In addition, the *Student* fills out the **Online Placement Evaluation (D)**.
10. When all the assessment forms have been completed, the *Student* must hand in a **digital copy of the Report and internship portfolio** to either masteroncology@vumc.nl or cvmaster@vumc.nl.
11. The *Internship Examiner* will appoint an *Independent Assessor* to separately assess the report.
12. When the portfolio is complete and the grades are sufficient, the *Examination Board* will approve the internship and the student will be granted the assigned credits.

Supervisor = Day-to-day supervisor

Assessor = Principal Investigator/Head of the department/Professor

Internal VUmc supervisor = VUmc-employed expert in case of external internship (outside VUmc)

Internship examiner = VU-appointed official responsible for internship examination

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(A) List of Agreements

General information			
Name student			
Student number		Year of introd.	
Title			
Supervisor (Daily supervision)			
e-mail			
Assessor (Principal investigator)			
e-mail			
Institute	(In case of an external internship an internal VUmc supervisor is mandatory)		
Department			
Internal VUmc supervisor			
e-mail			

Agreements			
Use <i>Regulations for Internships</i> to complete this form			
Start date			
End date			
Interruptions	From:	To:	
	From:	To:	
Required courses prior to internship			
Courses during internship			
Oral presentations	1st presentation		
	2nd presentation		
Student - Supervisor meetings	Supervisor (minimally 1x/week)		
	Assessor (minimally 1x/month)		
Interim assessment date			

Signatures		
Signature Supervisor	Signature Assessor	Signature Student
Date	Date	Date

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(B) Research Proposal concept

Your Research Proposal should have the following form:

1. Student information	<i>Name student:</i> _____ <i>Student number:</i> _____ <i>Name Assessor:</i> _____ <i>Institute:</i> _____ <i>Department:</i> _____ <i>Date:</i> _____
2. Title of the project	
3. Summary (1 paragraph)	
4. Description of the research 4.1 Introduction (ca. 1 page) 4.2 Approach (ca. 2 pages) 4.3 Planning (short)	
5. Literature (List of papers)	
6. List of references	
7. Start, finish and time schedule	<i>Start</i> <i>Finish</i> <i>Time Schedule</i>
8. Signature	<i>I hereby declare that I have completed this form truthfully</i> <i>Name student:</i> _____ <i>Date:</i> _____ _____

Please return the form, completed and signed, via e-mail (**submit the form in PDF format**) to masteroncology@vumc.nl/cvmrmaster@vumc.nl.

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(C) Interim Assessment

General information			
Name student			
Student number		Year of introd.	
Title			
Supervisor			
Assessor			
Institute			
Department			

Self-reflection by student	
Skills learned so far	
Strong points	
Points of improvement	
Supervision	

Evaluation of student by supervisor	
Strong points	
Points of improvement	

Signatures	
<i>Signature Supervisor/Assessor</i>	<i>Signature Student</i>
<i>Date</i>	<i>Date</i>

Digital Placement Evaluation

Fill in the digital evaluation form via the following link:

<https://www.formdesk.com/vuamsterdam/internshipOC>