

Prospective Internship Site Profile  
Department of Health Education & Behavior

Location: Gainesville FL Date: 3/31/15  
City State

Agency: Florida Department of Health, Alachua County Health Department, Sexually Transmitted Disease (STD) Program

Contact: Larissa Cantlin-Plemons

Address: 224 SE 24th ST Gainesville FL, 32641  
Street / PO Box City State / Zip

Phone: 352-334-3434 Fax: 352-334-8818

Email: Larissa.Cantlin-Plemons@flhealth.gov Website: http://alachua.floridahealth.gov/

What semesters is your agency available to accept interns?

- Fall (August – December)       Spring (January – April)       Summer (May – August)

Normal work hours (Please indicate any evening or weekend time commitments):

*Monday-Friday 8:00am to 5:00pm*

Is office space available to interns?       Yes       No      \_\_\_\_\_  
Comments

Is a computer available to interns?       Yes       No      \_\_\_\_\_  
Comments

Does your agency offer paid or non-paid internships?       Non-paid       Paid (amount): \_\_\_\_\_

List other benefits your agency offers interns (i.e. housing, health insurance, travel reimbursement, etc.)

*Mileage reimbursement for travel.*

List required purchases for interning with your agency (i.e. parking pass, uniform, etc.)

*N/A*

List the required skills or previous experience necessary for interning with your agency.

**Computer skills**

**An interest in STD and disease intervention**

Special Requirements (i.e. special application, proof of health insurance, immunization, etc.)

*Please note: All interns are required to purchase professional liability coverage for \$1,000,000.*

**All interns will need to go through Florida Department of Health training and will be required to partake in an background check.**

List a description of duties your agency expects to be fulfilled by interns. Please include additional literature if desired.

**Completion of Centers for Disease Control and Prevention STD Employee Development Guide Modules**

**HIV pre/post test counseling**

**Chlamydia and gonorrhea interviewing and counseling**

**Surveillance activities (report positive results, verify treatment, access medical records)**

**Community outreach (STD screenings)**

**STD Health Education presentations**

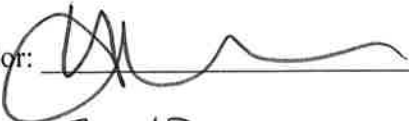
**Research paper or presentation on STD of interest**

List any important information about your agency.

*N/A*

Would you like to be added to the Department's list of approved sites for future interns?  Yes  No

**FOR OFFICE USE ONLY:** CONTRACT ON FILE: \_\_\_\_\_

Approval of Intern Coordinator:  \_\_\_\_\_ Date: 3-31-15

Approval Expiration Date: 3-17