Student Internship Agreement

Student Name: ____________________________________________
Student ID#: ____________________________________________ Email: ________________________
Home Telephone #: ___________________________ Cell Telephone #: ________________________

Once registered, the student agrees to:

1. Meet with the faculty mentor as assigned
2. Complete 45 internship hours per credit during the semester/session
3. Complete the specific academic requirements outlined in the Learning Activity Proposal
4. Conform to the internship company’s rules and regulations
5. Display proper professional dress and grooming habits

**Important** Health and accident insurance is the individual student’s responsibility. The College is not responsible for a student’s personal injuries that may be incurred during a student’s internship off campus. The College does not provide medical coverage or pay medical and/or hospital costs.

_________________________________________       ________________________
Student Signature                                      Date

The Internship Office provides services to all students based on eligibility requirements without regard to race, color, religion, sex, age, national origin, disability, marital status or sexual orientation, in accordance with Federal & State Law.