

CAREER SERVICES

| Is this Intership Paid or Unpaid? □ Paid □ Unpaid | | | | | | | | |
|--|---------------|--|--|--|--|--|--|--|
| ☐For Academic Credit | □Non-Academic | | | | | | | |

INTERNSHIP AGREEMENT FORM

Instructions

Students wishing to participate in an internship for the purpose of fulfilling their academic credit requirements for an Internship* course must have an Internship Agreement Form on file with the Internship Coordinator. To be considered for approval, this form must be completely filled out, *typed*, *and include all electronic signatures from all parties*.

Guidelines for completing this form:

- Complete the student information sections and provide your electronic signature.
- Have the person who will be your internship site Supervisor/Mentor complete the internship information sections. **The Supervisor/Mentor needs to provide their electronic signature as well.**
- Proofread the form to ensure all sections are filled out completely with electronic signatures and submit the form to the Internship Coordinator: **intern@cscc.edu** who can also answer any questions you may have.

NOTE: This form must be emailed to: **intern@cscc.edu** by Friday of Week 13 during Autumn or Spring semesters or by the second Friday in July in Summer semester in order to be considered for approval for an internship the following semester.

STUDENT INFORMATION (To be completed by the Student) DATE OF APPLICATION (MM/DD/YYYY) **INTERNSHIP SEMESTER/YEAR** SEMESTER: Autumn Spring Summer YEAR: NAME **COUGAR ID** STUDENT EMAIL **PHONE ANTICIPATED GRADUATION SEMESTER/YEAR** PROGRAM/MAJOR SEMESTER: Autumn Spring Summer YEAR: **HOW DID YOU OBTAIN YOUR INTERNSHIP?** Friend/Family Provided Job Lead College Provided Job Lead Recruiting Agency Current Employer Online Job Board/Search

Student Disclaimer and Signature

- $\checkmark \;\;$ I certify that my answers are true and complete to the best of my knowledge.
- ✓ I understand and agree to the responsibilities expected of me during the internship. I will adhere to the agreed upon work schedule and to the internship site's policies, procedures and/or work rules as well as to the Student Code of Conduct. I will provide my employer with high quality work performance. I am aware of the compensation arrangement that has been made for the work I will be completing; that this is a learning experience and that I am not entitled to a job upon the completion of the work experience.
- ✓ In consideration of being permitted to participate in an internship at the company listed herein, myself, heirs, administrators, and assigns forever discharge Columbus State Community College, the employees thereof, and the State of Ohio, from any and all actions, causes of action, claims, charges, demands, complaints, damages, injuries, costs, loss of services, expenses, and compensation on account of or arising while in, on, en route, to or from said internship.

| STUDENT SIGNATURE | DATE |
|-------------------|------|
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Rev. 01/11/2024

INTERNSHIP AND EMPLOYER INFORMATION

(To be completed by the Internship Site Supervisor/Mentor)

| COMPANY NAME | | | | | | | | | |
|---|-----|-----------|---------|----------|----------------|----------|--------------------|--|--|
| STREET ADDRESS CITY | | | STATE | | ZIP | | | | |
| SUPERVISOR/MENTOR NAME SUPERVISOR/MENTOR | | | | NTOR TIT | LE | | | | |
| SUPERVISOR/MENTOR EMAIL SUPERVISOR/MENTOR PHONE | | | | | | | | | |
| INTERNSHIP POSITION/TITLE DEPARTMENT | | | | | HOURS PER WEEK | Н | IOURLY RATE/SALARY | | |
| START DATE / / VIRTUAL OR ON-SITE / / / Virtual On-Site ENTER DAYS/HOURS ON-SITE: Job Responsibilities | | | | | | | | | |
| 1. All students seeking internship for academic credit MUST draft a paragraph below outlining the specific job duties that align to their academic major. Be as descriptive as possible, describing any computer software, systems, or industry skills that will be utilized in the internship that are relevant to your major. 2. Note regarding students wishing to use their current employer for an internship (This MUST be pre-approved by the department or faculty representative and is NOT guaranteed): When using a current employer for internship, job duties MUST fall outside of normal day-to-day work responsibilities and should also be connected to work experience that aligns to the student's academic major (i.e., any new or expanded responsibilities, working in a different department, taking on a special project, etc.). If seeking to intern for academic credit with a CURRENT employer, please also describe below how your internship duties will fall outside of your present work responsibilities. | | | | | | | | | |
| | | | | | | | | | |
| | Sup | ervisor/M | entor D | Disclai | mer | and Sigr | nature | | |
| ✓ I certify that my answers are true and complete to the best of my knowledge. ✓ I agree to supervise this student and provide ongoing instruction throughout this formal training experience. ✓ I agree to remain consistent to the internship description, monitor the intern's performance and return the supervisor/mentor evaluation to the academic department representative at the end of the semester. ✓ I attest the employing organization adheres to an equal opportunity employment policy and does not discriminate against potential candidates. ✓ In the case of an unpaid internship: I attest that the intern is not replacing a regular permanent employee. The working arrangement is an agreement between the company and student. I agree to abide by the Department of Labor guidance on unpaid internships. | | | | | | | | | |

DATE

INTERNAL OFFICE USE ONLY

initiated by Columbus State. This includes, but is not limited to, Title IX, Discrimination/Harassment/Retaliation, Student Conduct,

✓ I agree to fully cooperate with any investigation involving the student, both initiated by the internship site and investigations

or any violation of School/Internship Site Policy, Procedures and/or Rules.

EMPLOYER/SUPERVISOR/MENTOR SIGNATURE