



DISTRICT INTERNSHIP AGREEMENT FORM

I. BACKGROUND INFORMATION

Student's Name: _____

Address: _____ City: _____ Zip: _____

Telephone Number: _____ Grade: _____

Email: _____ Date of Birth: _____ Age: _____

Parent/Guardian: _____

II. SUPERVISOR INFORMATION

Internship Site: _____

Address: _____

Supervisor Contact: _____

Telephone Number: _____ Email: _____

III. ARTICLES OF AGREEMENT

The student, internship coordinator, parent, and supervisor jointly agree to the following:

1. The internship experience must be at a work-based site directly related to the occupational interest documented in the student's career plan.
2. The internship site will conform with all local, state, and federal labor laws while providing the student with meaningful work-based experiences.
3. The student will be accepted and assigned to the internship site without regard of race, color, national origin, sex, handicap, or disadvantage.
4. The student will initially report to the internship site on _____ at _____.
(date) (time)
5. The supervisor will provide safety instructions to the student.
6. Adequate insurance coverage for the student will be provided by the student's parent(s) or guardian.
7. The student who is participating in the internship program shall be responsible for his/her conduct, but the parent or guardian understands that he/she is responsible to the school for the student's conduct, as well.
8. The student will remain at the internship site for the agreed upon time period. Frequent absences may result in dismissal from the program.

9. Monetary compensation may not be provided. Instead, students will receive high school credit for their participation.
10. Transportation for the student to and from the internship site will be provided by the student, parent or guardian; however, it may be provided upon request.
11. The supervisor shall provide an evaluation of the student after the experience has concluded and at other agreed upon intervals as necessary for grading.
12. Consideration for a future internship requires that a student be earning an A or B (C with instructor's consent) and have outstanding attendance in their current internship, at the mid-quarter grading period.
13. This agreement may be terminated for due cause or unforeseen business conditions only after consultation with the internship coordinator.

IV. SIGNATURES

Student Signature	Parent Signature	Supervisor Signature
-------------------	------------------	----------------------

Once this form is fully complete:

**Students: Sign and Save this form as Student First Name. Student Last Name. ID Number.Agreement
Forward the completed and saved form to a parent.**

**Parents: Sign and re-save this form as Student First Name. Student Last Name. ID Number.Agreement
Forward the completed and saved form back to the student**

Students: Forward the parent signed form to your supervisor

**Supervisors: Sign and re-save this form.
Forward the completed and saved form back to the student**

Students: Forward the completed form with all signatures to Krista.Paul@d214.org

VI. INTERN'S SCHEDULE

Monday: _____

Tuesday: _____

Wednesday: _____

Thursday: _____

Friday: _____

Saturday: _____

Sunday: _____

Special notes related to schedule:

Creating digital signature in Acrobat Reader
To create your digital signature file follow these steps:

1. Click on the "Signature Field" in the PDF form.
The signature field is indicated by a red arrow in the top left corner of the field
2. Select "I want to sign this document using a new digital ID I want to create now"
Click "Next"
3. Select "New PKCS#12 digital ID file" and click "Next"
4. Fill out the "Identity Information" and click "Next".
(Name and email address is sufficient)
5. Specify the location on your computer where you want to store the digital signature file.
Enter and confirm the password that you want to use for the digital signature file.
Click "Next."

NOTE: Make sure to save the file in a location that is easy to remember and use a file name that will be easy to find. Store the password in a safe location. You will have to enter this password when signing PDF documents in the future.

Your new digital signature file will now be saved to your computer and you will be prompted to apply your signature to the PDF document.