



Linking Employment, Abilities and Potential

**HIGH SCHOOL • HIGH TECH**



### Internship Learning Contract

This commitment must be read, understood, and signed by the intern and the supervisor. It will also be signed by the HS/HT Program Coordinator and your guardian, if appropriate, to ensure that all parties concur with the goals and expectations of the internship.

Name of Student: \_\_\_\_\_

Company or Organization: \_\_\_\_\_ Dept. \_\_\_\_\_

Address of Internship Location: \_\_\_\_\_

Name of Contact Person \_\_\_\_\_ Title: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

The internship is set up for a minimum of \_\_\_ hours [ per week]

Internship Schedule: Begins \_\_\_/\_\_\_/\_\_\_ Ends \_\_\_/\_\_\_/\_\_\_ Planned Absences: \_\_\_\_\_

Monday	Tuesday	Wednesday	Thursday	Friday

The student will be paid \$7.40 per hour. Paychecks will be issued by LEAP twice a month, on the 15th day and the last day of the month.

The student will report to

Name: \_\_\_\_\_ Title: \_\_\_\_\_

General Responsibilities and Duties:

Specific Projects and Products:

Specific Resources and/or Accommodations Needed:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Student:

I, \_\_\_\_\_, agree to the following expectations:

1. To attend regularly and on time in my assigned internship.
2. To confirm to the regulations of the organization in which I am interning.
3. To notify my internship supervisor on days that I will be absent.
4. To notify the HS/HT Program Coordinator, if any problems or concerns arise.

Supervisor;

I, \_\_\_\_\_, agree to provide the following:

1. Assignments and duties that constitute a learning experience for the student.
2. Mentoring for the student.
3. Assessment and feedback to the HS/HT Program Coordinator, when requested.
4. Notification at any time to the if the supervising manager changes.
5. Notification at any time to the HS/HT Program Coordinator if work performance is unsatisfactory or there are any problems with the placement.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_