

**SCHOOL BOARD OF MIAMI-DADE COUNTY, FLORIDA
Internship Cooperative Agreement**

Internship programs are planned to develop students academically, economically and socially. There are responsibilities to the student and parent that must be considered.

The Student agrees to comply with all requirements found in the Student Internship Handbook:

1. Adhere to rules and regulations of the business and act in an ethical matter;
2. Provide his/her own transportation to place of internship;
3. Inform the internship provider and the instructional supervisor in the event of illness or emergency that prevents attendance;
4. Be in attendance and punctual on the job and for all specified meetings;
5. Not voluntarily quit/resign a job without previous authorization from the internship provider and the instructional supervisor; and
6. Understand that the instructional supervisor is the recognized authority for making any adjustments or changes in the internship program. This principle applies regardless of whether or not the student obtained his/her own internship position.

The Parent /Guardian agrees to:

1. Ensure that their child follows internship provider/school expectations of the program;
2. Support the policy of requiring the student to complete the length of the internship program;
3. Understand that the student is responsible for his/her own transportation; and
4. The internship provider may not be subject to the same background screening requirements as M-DCPS employees, M-DCPS makes no representation and takes no responsibility for enforcement, verification or vetting of the same.
5. This Agreement shall be governed by, and construed in accordance with the laws of the State of Florida, venue in Miami-Dade County
6. Understand that Miami-Dade County Public Schools (M-DCPS) will not be held liable in case of accident/injury on the way to and from internship. Student must obtain M-DCPS Student Accident Insurance to be eligible for the program.

We, the undersigned, agree that we have read and understand the purpose and intent of the Internship Program. The term of the Agreement shall not exceed three years from date of execution. The School Board reserves the right to terminate this Agreement without cause by giving the Internship Provider thirty (30) days written notice.

Student Name Print

Signature

Date

Parent Name Print

Signature

Date

District Administrator Print

Signature

Date

Miami-Dade County Public Schools Academic Year Internship Program

1. Internship commitment is for the entire school year (August 2020 to May 2021).
2. Transportation difficulties or lack of interest cannot be an excuse to exit the program. Please confirm transportation prior to committing to the internship.
3. Any changes in internship provider or student contact information it must be approved by your internship coordinator. All changes must be communicated by the coordinator to the Office of Community Engagement immediately. Changes are only accepted of exceptional circumstances.
4. Your coordinator may ask to maintain a log sheet signed by the internship provider. Student must submit a copy to the coordinator.
5. Student cannot participate in an internship if reporting to an immediate family member, or in a home-based business.
6. Internship hours must be during school week.
7. Internship provider must submit a grade sheet directly to the internship coordinator before the end of the grading period. Encourage your provider to submit your evaluation on time.

Print Student Name _____ **ID#** _____

I have read and understand the Required Student Procedures. Non-compliance with the procedures may result in failure of a grading period and/or removal from the internship program.

Student's Signature _____ **Date** _____

Miami-Dade County Public Schools
Office of Community Engagement
Academic Year Internship Program
SUBMIT TO YOUR SCHOOL INTERNSHIP COORDINATOR

Student Internship Placement Data Form 2020 - 2021

INSTRUCTIONS

1. Call or email your proposed internship provider and make an appointment for an interview IMMEDIATELY. Please return this SIGNED form to your internship coordinator as soon as possible. E-mail or call your internship coordinator if you have any questions or concerns.
2. If you need to leave a message for the internship provider, please let them know you are a Miami-Dade County Public Schools student from the Academic Year Internship Program.
3. At the interview, discuss with your internship provider the activities available to you, internship responsibilities, and the days, and hours you are required to attend. Share the schedule with your school internship coordinator for final approval.
4. Bring this form and your resume with you to the interview. Respective individuals must sign below for the placement to be complete.
5. Before you leave the interview, if hired, set a day to begin the internship no later than the second week of school, August 23-27, 2020.
6. Keep a copy of this form for your records and email it to your internship coordinator.

STUDENT INFORMATION

Student Name:

ID #:

School:

Parent's/ Guardian's Name:

Student's E-mail:

Student's Phone Number:

Number of Credits:

Course Number:

PROVIDER INFORMATION

Internship Provider Name:

Career Field:

Internship Site Address:

Phone:

E-mail:

Internship Provider's Signature: _____ Date: _____

Student's Signature: _____ Date: _____

Intern Emergency Contact Information Sheet

Student Information:

Student's Name: _____ School: _____

Student's Phone: _____ Student's Email: _____

Parent's Name: _____ Parent's Phone: _____

Parent's Email: _____ Other Contact: _____

Phone: _____

Student Internship Schedule:

Mon.: _____ : _____ AM/PM to _____ : _____ AM/PM

Tues.: _____ : _____ AM/PM to _____ : _____ AM/PM

Wed.: _____ : _____ AM/PM to _____ : _____ AM/PM

Thurs.: _____ : _____ AM/PM to _____ : _____ AM/PM

Fri.: _____ : _____ AM/PM to _____ : _____ AM/PM

School Contact:

Email: Your school-site coordinator

Please fill out this form, save a copy for your records, and provide a copy to your business mentor and school's internship coordinator. If any information changes, please be sure to provide your mentor and coordinator with updated information.