Internship Student Agreement

I. Student Information

Name ___________________________________  Email ________________________________
Major/Minor ______________________________  Expected Graduation Date ______________

II. Internship Employer Information

Employer ____________________________________________
Internship Title/Function ________________________________
Supervisor Name _________________________________  Email ________________________________
Company Address ______________________________________
City, State _______________________________  Zip ________________________________
Phone ________________________________
Pay ________________________________  Hours per week _______________________________
How did you find your internship? ______________________________________________________

III. Responsibilities of the student

1. As a representative of Calvin College at your internship site, you are expected to perform in a professional manner during the entire course of your internship. Conduct yourself with integrity, respect, and responsibility. This is important for both your career and for future Calvin students who may seek a position at your internship site.

2. The employer and college faculty will review your performance. It is the employer or college’s prerogative to terminate an intern because of unsatisfactory performance. Credit may not be granted in this situation.

IV. Assumption of Risk

1. You are voluntarily agreeing to participate in the Calvin College Internship Program.

2. Use good judgment when applying for, interviewing for, and accepting positions.

3. You will be engaged in an organization and activities over which Calvin has no control. This includes all activities connected with your internship, including travel. For these reasons, it is of particular importance that you pay careful attention to any situation or risk that may be present and which may have the potential to harm you in any way. Calvin College cannot accept responsibility for any such situation, risk, or harm, because Calvin College has no control over those environments. However, Calvin College wants to support and assist you, and will address and follow up on any complaint or concern that you may raise with the College. For that reason, it is very important that you promptly tell your Calvin College professor or Career Development staff of any such potential situation or risk.

I understand and accept responsibility for the agreements of this program, as listed above.

Signed ___________________________________________  Date ________________________________