

## The Ohio State University at Newark and Central Ohio Technical College General Internship Agreement (Non-credit Bearing)



Office of Career Development & Experiential Learning Services Warner 226, 1179 University Drive, Newark, OH 43055 goetz.152@mail.cotc.edu, goetz.152@osu.edu 740.755.7804

Every student participating in a non-credit bearing internship must provide documentation prior to the start of the experience. The Internship Agreement should be reviewed and signed by all involved parties:

# 1. Participating Student

- 2. Internship/Experience Site Supervisor
- 3. Office of Career Development

The student should return this completed form with an **Internship Description** to the Office of Career Development located in Warner 226. All parties should retain a signed copy.

# 1 Student Information—completed by the Participating Student

Name			Stu	udent I.D.		
Last	First	М.І.		D	o not list your Soc. Sec. #	
Address						
Street Address			Apartment/Unit #			
City			State	Z	ip Code	
Univ./College E-mail Address			Phone			
Major/Program		Grad	uation Date	Class Y		
Term of Internship:	Summer Autumn S	Spring Total I	Hours in Internship	(estimated)		
	S	tudent Emergency	Contact Informatio	n		
Emergency Contact Name			Relationship		Phone	
Contact Address						
St	reet Address		City	State	Zip Code	
2 Internship	Experience Sit	e—completed	by the Site Su	ipervisor		
Company/Organiza	tion Name					
Address						
Stree	t	City	State	Zip Code	County	
Intern Supervisor						
E-mail		Phone		Fax		

### Internship Description—Developed by Student & Site Supervisor

The purpose of the **Internship Description** is to define what the intern will be doing throughout the internship experience. The major components of the internship should be clearly defined, and all involved parties should have mutual understanding. Existing internship descriptions can simply be attached to this agreement.

Information to Include:
Internship experience title
Primary duties and responsibilities of intern
Established learning outcomes related to the student's program of study—as a result of the internship experience,
the participating student will be able to
Hours per week/days per week service is to take place
Total number of hours student is expected to serve in the internship
Internship start date/end date
Wages employer is to pay intern per hour— <i>if applicable</i>
The manner and frequency in which the student will receive feedback/evaluation

#### - Standard student & employer evaluations are available -

#### Non-Discrimination

Facility and College agree that neither shall discriminate against any individual on the basis of age, sex, race, creed, color, national origin, religion, disability, veteran status, or sexual orientation, and that Facility agrees to comply with all nondiscriminatory laws to which College is subject. General information, questions, concerns or complaints related to these matters may be directed to Jacqueline H. Parrill (Director, Human Resources), 1179 University Drive, Newark, Ohio 43055.

**Office of Career Development—Internal Use** 3 Title Name The form is received by the Office of Career Development & Experiential Learning Services, is acceptably completed, proper signatures have been attained, and an Internship Description is attached.

Career Development Representative Signature

Date