The purpose of the internship is to: provide learning experiences outside of the traditional classroom, engage each student in topics of interest to them, and build the strength of our community through positive relationships between business/community partners and students.

Internship Agreement A Guidance Document

April 14, 2021

The Maine Department of Education and the Maine Department of Labor created the following guidance in collaboration with the stakeholders listed on page 13 of this document. Users are encouraged to consult any applicable SAU/CTE policies and procedures for consistency and consider whether additions to or subtractions from the guidance or model documents are appropriate.

Internship Agreement Form		
Table of Contents		
Components of Internship Agreement Form	Page	
General Information	2	
Student Responsibilities	3	
Career Pathways Coordinator Responsibilities	4	
Parent / Guardian Consent Form (Parent signature needed)	5	
Emergency Medical Information (Parent signature needed)	6	
Internship Project Outline	7	
Internship Application Section 1 (Student completes and signs)	8	
Internship Application Section 2 (Supervising Teacher/Instructor/School Counselor completes and signs)	9	
Internship Application Section 3, Seven Point Criteria for Internships	9-10	
Internship Application Section 3, General Responsibilities of the Parties Involved	10-11	
Internship Application Section 3, Signatures from All Parties Involved	12	
Appendix A Co-creators of the Internship Agreement Guidance Packet	13	
Appendix B Sample Internship Evaluation Criteria	14-15	
Appendix C Sample CTE Internship Nomination Form	16	

.

The purpose of the Internship is to provide learning experiences outside of the traditional classroom, engage each student in topics of interest to them, and build the strength of our community through positive relationships between community business partners and students.

Student Name	
Business/Community Partner	
Career Pathways Coordinator	
Building Administrator	

Student Section		
Student Area of Interest		
Grade		
High School Name		

Internship Manager Section		
Career Pathways Coordinator		
Building Administrator		
Supervising Teacher/Staff (if applicable)		

Student Responsibilities

The student responsibilities are:

- Communicate any issues or concerns in a timely manner to the Career Pathways Coordinator (if applicable, include Supervising Teacher).
- Participate in site safety training
- Attend all meetings and Business/Community site visits per project outline.
- Contact the Business/Community site and the Career Pathways Coordinator (if applicable, include Supervising Teacher) in the event of anticipated absence or tardiness.
- Reschedule meetings and/or Business/Community site visits in the event of an absence.
- Complete all agreed upon student tasks and documentation as listed in the Project Outline, including a thank you note to Business/Community Partner.
- Develop and maintain a portfolio of activities, reflections, assignments, projects, and any other deliverables as outlined.
- Develop and deliver a final project presentation to be assessed by your learning team.
- Failure to meet all parts of the agreed upon could result in your dismissal from the internship.
- If for credit, once site visits have begun and the internship is in the student's schedule, withdrawal from the internship can result in a "WF" (withdrawal fail) for the Internship class on the student's transcript.
- Maintain professionalism during the internship

Student Signature:

Date:

	Career Pathways Coordinator Responsibilities		
	The Career Pathways Coordinator responsibilities are:		
•	Locate and secure a community/business partner site		
•	Perform the site safety check		
•	Verify safety training provided for student		
•	Review the Business/Community Partner's discrimination and harassment policies and check for consistency with the School Administrative Unit (SAU)/Career and Technical Education (CTE) site discrimination and harassment policies.		
•	Review and determine (with the Business/Community Partner), whether the SAU/CTE or the Business/Community Partner carries the burden of providing liability insurance related to the student's participation in the internship, as well as the scope of such insurance.		
•	Create the Project Outline based on information from the student, teacher, and site. Be available to the student per the project outline.		
•	Serve as liaison to the Business/Community site and be available to address concerning they arise.		
•	Facilitate and document student progress and completion using predetermined methods of documentation.		
•	Notify site of any concerns or unforeseen events that may affect scheduling and/or completion of the internship.		
•	May end an internship if a student is behind in appointments and learning tasks.		

Career Pathways Coordinator Signature

Date:

Parent/Guardian Consent Form

Dear Parent/Guardian,

This form provides information to you regarding <u>STUDENT NAME</u> participating in an internship. Please read and fill out the Emergency Medical Authorization section on page 6. When you sign this form, you give permission for your adolescent to participate in the internship. If you have any questions, please reach out to the school contact person.

The purpose of the internship is to provide learning experiences outside of the traditional classroom, engage the student in topics of interest to them, and build the strength of our community through positive relationships between community business partner and the student.

Career Pathways Coordinator	
Supervising Teacher/Staff (if applicable)	
Business/Community Partner	
Business/Community Mentor	
Type of Business	
Internship Location	
Internship Start Date	
Internship Projected End Date	
Internship Schedule	

Your adolescent is participating in a multi-day (long term) internship and will be working from a Project Outline. If it is the school's intent and policy, the evidence of successful completion of the internship can be used to obtain graduation credit through the internship experience.

Please review your adolescent's Project Outline. It provides information on the primary tasks and the days/times of the internship. Information is provided if your adolescent goes to their internship site during the regular school day. By signing below, you give permission for your adolescent to leave during regular school hours (during their assigned internship time) to attend their internship site through one of the school approved transportation methods listed below.

Parent/Guardian Signature: Date:			
Transportation: Private Car Other:	School Transportation	_ Public Bus	_Walk

Internship Parent/Guardian Consent Form Emergency Medical Authorization

I agree to the following procedure should medical attention become necessary:

- 1. The Career Pathways Coordinator or Supervising Teacher, Business/Community Mentor, or authorized school representative will make every effort to contact the parent, explain the circumstances, and receive instructions for the student's care.
- 2. If the Career Pathways Coordinator or Supervising Teacher, Business/Community Mentor, or authorized school representative is unable to reach the parent, he/she will authorize medical attention, if such is deemed necessary, upon the advice of a qualified physician.

Parent/Guardian Contact (name/number):	
Emergency Contact (name/number):	
Health Insurance Information:	
Company:	
Subscriber:	
I.D. Number:	
Existing Medical Conditions:	
Condition:	
Treatment (if any):	
Medication(s):	
Special Instructions:	

Have any necessary medical kits been provided to the school? (Parent is responsible for providing any necessary kits.)

I have read this consent form and I give permission for <u>STUDENT NAME</u> to participate in the internship as it has been described in this form and in the Project Outline. I give permission to the Business/Community Mentor and Career Pathways Coordinator or Supervising Teacher to obtain and release information to each other as it relates to this internship and the goals and achievements of it. I further agree to assume financial responsibility for any medical costs incurred by <u>STUDENT NAME</u> while participating in the internship and understand that a student will not be allowed to participate in an internship without a signed "Parent Consent Form/Medical Authorization Form".

Parent/Guardian Signature: _	Date:

Internship Project Outline

Learning goals, including completion of a site safety training:

Teacher:

Student:

Start Date:

End Date:

Business/Community Partner:

Mentor (if applicable)

Student Tasks	Related Standards

Student Methods of Documentation	Teacher Methods of Documentation

We have read and understand the Internship Project Outline containing the learning goals, student tasks, and methods of documentation needed to obtain credit (if applicable) for this experience.

Student Signature:

Date: _____

Career Pathways Coordinator

Date: _____

Teacher /Staff Member (if applicable)

Date: _____

Building Administrator

Date: _____

Internship Application

Section 1: To be completed by student and submitted to the Career Pathways Coordinator.

Last Name:	First Name:	Date:
Mailing Address:		
City:	Zip Code:	Phone:
Email:		Year of Graduation:
Birthdate:	Proposed Start/End Date:	

Why are you interested in an internship?

Describe your professional and education goals.

What skills, qualities, and/or certifications make you qualified for this internship?

What educational or professional experiences have you had that have prepared you for this internship?

Professional or Education References

Name	
Phone Number	
Relationship	

Times Available

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

I certify that the information I have provided on this application is accurate to the best of my knowledge.

Student	Signature

Date_____

Internship Application

Section 2: To be completed by Supervising Teacher/Instructor/School Counselor

Has this student demonstrated proficiency in skills necessary to be successful in this internship?	_Yes	No
Has this student demonstrated outstanding professionalism in your interactions with them?	_Yes	No
Do you recommend this student for this internship?	_Yes	No
Additional comments:		
Signature:	Date:	

Section 3: To be reviewed and signed by Student, Parent/Guardian, Business/Community Partner, Business/Community Mentor, Career Pathways Coordinator, Building Administrator

The Fair Labor Standards Act (FLSA) requires "for-profit" employers to pay employees for their work. Internships may be paid or unpaid. The test for unpaid interns and students is based on the courts' "primary beneficiary test". The seven-point criteria below must be used to determine employment relationship/status. If employment relationship is determined, then all federal/state wage protections apply. The primary beneficiary test is a flexible test and no single factor is determinative. Whether an intern or student is an employee depends on the unique circumstances of each case. Minimum age and prohibited occupation coverage apply whether or not it is an employment situation.

Seven Point Criteria for Internship

1. The extent to which the intern and the employer clearly understand that there is no expectation of compensation. Any promise of compensation, express or implied, suggests that the intern is an employee—and vice versa.

2. The extent to which the internship provides training that would be similar to that which would be given in an educational environment, including the clinical and other hands-on training provided by educational institutions.

3. The extent to which the internship is tied to the intern's formal education program by integrated coursework or the receipt of academic credit.

4. The extent to which the internship accommodates the intern's academic commitments by corresponding to the academic calendar.

5. The extent to which the internship's duration is limited to the period in which the internship provides the intern with beneficial learning.

6. The extent to which the intern's work complements, rather than displaces, the work of paid employees while providing significant educational benefits to the intern.

7. The extent to which the intern and the employer understand that the internship is conducted without entitlement to a paid job at the conclusion of the internship.

Internship General Responsibilities of the Parties Involved

Student:

- 1. Adhere to company policies including attendance, dress code, safety, required training, and others as they apply.
- 2. Maintain good academic and social standing at high school and CTE school (if applicable).
- 3. Complete all assignments and tasks associated with the internship.
- 4. Communicate any issues or concerns immediately with the company supervisor <u>and</u> the Career Pathways Coordinator.
- 5. Comply with safety training
- 6. Comply with company dress code

Career Pathways Coordinator:

- 1. Collaborate with company supervisor on planning internship activities and evaluating student performance.
- 2. Maintain regular contact with student and company supervisor regarding progress.
- 3. Communicate any issues or concerns immediately with student, company supervisor, school counselor, and Parent/Guardian.
- 4. Verify safety training acquired
- 5. Perform safety site visit prior to placement
- 6. Must review the 7- point criteria to determine employment relationship/status

Company Supervisor:

- 1. Be aware of and adhere to laws and regulations as they pertain to child labor.
- 2. If applicable, collaborate with Career Pathways Coordinator on planning internship activities and evaluating student performance.
- 3. Communicate to the Career Pathways Coordinator and student any policies and/or procedures relevant to the internship.
- 4. Provide a working environment and experience relevant to the student's goals and objectives.
- 5. Provide appropriate training and supervision to promote safety and support the educational progress of the intern.
- 6. Communicate any issues or concerns immediately with the student and Career Pathways Coordinator.
- 7. Provide required safety training.
- 8. Provide student with notification of required dress code.
- 9. Provide appropriate onboarding process to student and Career Pathways Coordinator.

All Parties

DISCRIMINATION PROHIBITED

This Internship Program is a program of the <u>NAME OF SAU/CTE</u>. Discrimination because of race, color, sex, sexual orientation, gender identity or expression, religion, ancestry or national origin, age, or disability are prohibited.

DISCRIMINATION AND HARASSMENT POLICY AND PROCEDURE

Prior to entering into this agreement, the parties shall review the <u>NAME OF SAU/CTE</u> policies and procedures for reporting and investigating allegations of discrimination or harassment. The Business/Community Partner agrees to participate fully, including making any officers, directors or employees available to the SAU/CTE, in any investigation conducted by the SAU/CTE pursuant to its policy and procedures.

LIABILITY INSURANCE

Prior to entering into this agreement, the parties must discuss and determine whether the SAU/CTE or the Business/Community Partner carries the burden of providing liability insurance related to the student's participation in the internship, as well as the scope of such insurance. This burden must not fall on the student or the student's parent or legal guardian; however, engaging the student in this discussion can be an important learning experience.

RESPECT FOR CONFIDENTIALITY

Depending on the nature of the internship, students may be exposed to confidential information, including, but not limited to, the names of customers, clients, or patients of the business. Prior to the internship, the Business/Community Partner shall review any applicable legal requirements relating to confidentiality and the Business/Community Partner policies and procedures regarding confidentiality with the student. Failure to follow the law or Business/Community Partner policies during any internship should be reported to the student's SAU/CTE for appropriate disciplinary action.

ACKNOWLEDGEMENTS

Student: Should my internship experience require me to miss class time, I understand that I am responsible for contacting the teacher prior to missing class and for submitting the assignment by an agreed upon date. I also understand that I will be responsible for attending a meeting with the Career Pathways Coordinator and will complete an internship packet, an evaluation, and a thank you note to my host. I understand that I am representing both my school and the Internship Program and will take responsibility for my actions during and after my internship experience.

Parent/Guardian: I give my permission for <u>STUDENT NAME</u> to participate in an internship experience. I further agree to assume financial responsibility for any medical costs incurred by <u>STUDENT NAME</u> while participating in the internship experience. I agree to provide or work with the school to arrange transportation for my child to and from the internship site.

Intern Signature:	Date:
Business/Community Partner Supervisor Signature:	Date:
Parent/Guardian Signature:	Date:
Career Pathways Coordinator Signature:	Date:
Building Administrator Signature:	Date:
School Counselor Signature:	Date:
Supervising Teacher/Instructor/Staff (if applicable):	Date:

•

	earning Opportunities Stakeholder Group
Name	Role
Lanet Anthony	Co-Chair, Maine Community Coordinators
	Collaborative (Maine C3)
	Director of Community Connections
	RSU 14
James Boothby	Superintendent
	RSU 25
Paulette Bonneau	Director
	Biddeford Regional Center of Technology
Rachel Bowler	Labor and Safety Inspector
	Wage and Hour Division
	Bureau of Labor Standards
Or an and the Defect	Maine Department of Labor
Samantha Brink	Co-Chair, Maine Community Coordinators
	Collaborative (Maine C3)
	Career Exploration Manager
Scott Cotnoir	Sanford High School and Regional Tech Center Director
Scott Cothoir	
	Wage and Hour Division Bureau of Labor Standards
Joan Dolan	Maine Department of Labor
JOAN DOIAN	Director of Apprenticeship & Strategic Partnerships Bureau of Employment Services
	Maine Department of Labor
Diana Doiron	Maine Learning Results Life and Career Ready
	Content Specialist
	Maine Department of Education
Sarah Forster	Assistant Attorney General
	Maine Attorney General
Margaret Harvey	Middle School Career and Technical Education
margarot harvoy	Specialist
	Maine Department of Education
Dwight Littlefield	Director
5	Career and Technical Education
	Maine Department of Education
Katie McLaughlin	Workforce Development Coordinator
J	Mid-Maine Technical Center
Gail Senese	Director
	Adult Education
	Maine Department of Education
Donna Tiner	Federal Grant Manager
	Career and Technical Education
	Maine Department of Education

•

Appendix B

Internship Evaluation Criteria Sample

Evaluation Due Date:	Student Name:	Employer/Internship Host:	Supervisor:

Maine Dept. of Labor requires employer verification that the student-trainee continues to meet industry level standards as outlined in the Cooperative Education Training Plan Agreement (if applicable)

Supervision Signature

Date

Instructions: For each row, record the score that most closely describes the student's performance over the entire rating period.

	SCORE	4	3	2	1
		Excellent; Exceeds expectations	Very good; meets expectations		Unsatisfactory; Does not meet expectations
Work Attitudes Motivation and energy for self- improvement, enthusiasm, pride in work, adaptability, and willingness to learn		Mature interest in training/job and desire to learn.	Shows interest in training & learning.	U U	Needs improvement in attitude and interest towards training/job.
Team Skills Ability to get along with others, to use tact & courtesy, and to contribute to team efforts		Goes the "extra mile" to help make team successful.	courteous and helpful. Functions effectively as a	courteous most of the time, Gets along well with others. Willing to	Difficult to work with. Uncooperative, moody and/or tactless. Does not contribute to, or hinders, team efforts.
Dependability Attendance, punctuality, conscientious, reliability in meeting commitments	,	Consistently present and highly dependable and conscientious.	Present and can be counted on to meet commitments.		Struggles with being present and cannot be relied upon to meet commitments.
Appearance/Dress Appropriate hygiene, adheres to company policies and dress codes and appropriate demeanor.		Always professional and neat in appearance aligned with company policies and dress codes. Always exhibits appropriate demeanor.	to company policies and dress codes.	about appropriate appearance occasionally.	Needs to improve hygiene, appearance, and dress to meet expectations of workplace.
Interpersonal Communication Effective behavior, appropriate use of language, communication, and technology		Excellent interaction with customers, coworkers, and supervisors. Consistently interprets and follows instructions. Always uses language and technology appropriately.	generally follows instructions without difficulty. Uses	communicating and following instructions. Occasionally uses	Needs retraining in communications effectiveness and/or repeated and detailed redirection in appropriate use of communication.

		standard business policy.		
Initiative Is a self-starter and takes the lead in getting things done	Demonstrates ability to go above work requirements.	Wiling to meet obligations of the work.	obligations of the	Needs to show more initiative to complete obligations of the work.
Job knowledge Skill level, knowledge and understanding of all the phases of the job	Consistently demonstrates knowledge and skills needed for work tasks in alignment with policies of business.	Demonstrates skills needed for work tasks and knows policies of business and work.	the business policies and seeks support to learn new skills to	Needs to gain more knowledge of the business policies and be willing to ask for help when unsure how to complete a work task.
Safety Work habits and attitudes as they apply to working safely	Always practices job safety rules. Keeps workspace safe and tidy.	Usually practices job safety rules.		Needs to learn and practice better safety habits.
Quality of work How accurate, neat, error free and complete is work?	Consistently high- quality work. Accurate and neat on both routine and more complex assignments.	Very accurate, careful, and neat. Seldom makes errors on routine assignments.	acceptable standards. Completes routine	Work needs checking and improvement. Sloppy and often incomplete performance of work.
Quantity of work How much acceptable work is produced?	Produces high volume of work. Typically asks for additional work and always strives to improve productivity.	Consistently completes work on time with little or no supervision required.	work completed. Rarely fails to meet	Requires close supervision to complete assignments. Always behind in work. Seldom meets deadlines.
GRAND TOTAL				

Supervisor's Comments:

•

Appendix C

Internship Nomination Criteria Sample

Student nominee:

Student is nominated by:

•	
Instructor	
Name	

Program

Computer Science
Engineering
Early Education
Certified Nursing
Assistant
Medical Assisting
Intro to Medical Science

Criteria:

•

- A junior or senior, 16 years of age or older, enrolled in a CTE accredited program
- Nominated by an instructor
- In good academic standing and has achieved one of the following:
 - o Industry certified exam, OSHA and /or summative assessment
 - o 2-year program, first year completer in good academic standing
 - Second year program / certification earned or pending
 - o Is over 16 and has passed their program industry certification exam (e.g., CNA, AWS)
 - Positive attendance (may not participate with 3 unexcused absences/tardy)
- Is on track to receive credits for graduation

Prerequisite before placement

•	Resume	Completed safety	
•	Transportation	certification	
•	Host interview	Host company	
		agreement	
		Drug test	