Clark Advanced Learning Center Internship Agreement

Student:									
(First Name)							(Last Name)		
Business Partner:									
		Address)				DI	(City)	(Zip)	
Email:						_ Phone:			
Work Schedule:	M	T	W	Th	F	Time:			
								~~~~~~~~~~~	
Intern Responsibili business partner. Th	ities: ne stud ner's e	The student wilent mploye	dent will l exhibit es. Some	adhere the appr	to the In	ternship cou level of prof	rse requirements estat essionalism, courtesy,	olished by the school and the and responsibility expected screening and/or a criminal	
	ark) Iı	nternshi						pating in the Clark Advanced ve the school campus in order	
	Career	Coordi	nator ser	ves as pi				placement and monitors each ans, and business partners for	
career experience re performed under sa employees with rega	elating afe, ha ard to the st	to the nzard-fre safety, l udent a	course o ee condi health, g and adhe	bjectives tions. T eneral w re to scl	s. The I The Inte ork cone	Intern's activern will reco	vities will be supervise vive the same consideration of the same consi	bove listed position to provide ed by qualified personnel and eration the business provides cedures. The business partner not miss any Clark or Dual	
	uirem	ents. It	is inten	ded as a	guide to	fulfill the		ousiness partners to satisfy the e requirements and should not	
We have read this Ir	ıternsl	nip Agre	eement a	nd undei	rstand th	ne conditions	and provisions contai	ned therein.	
Intern			_	Date	<del></del>	Paren	t/Guardian	Date	
Business Partner			_	Date	<del></del>	Caree	r Coordinator	 	