

NEWBURYPORT HIGH SCHOOL

School to Career Program

Internship Student Agreement

Cheryl Zaino, School to Career Counselor

Tel: 978-465-4440, ext. 5022

E-mail: czaino@newburyport.k12.ma.us

-
1. I realize I am responsible for my grade and asking Mrs. Zaino about missing work. I will schedule time to meet with her twice a semester.
 2. I will not accept an internship unless I intend to keep it.
 3. I will always report for my internship at the scheduled time and I will remain there until I am due to finish. If I find that I am unavoidably detained or unable to report to work, I will always inform my employer and school to work counselor as soon as possible.
 4. I will be honest in all my dealings concerning my work with money, time, merchandise, and effort, and conduct myself in an appropriate manner presenting as neat an appearance as possible.
 5. I will perform an honest day's work, as well as strive to do the best job possible.
 6. My recreation will be scheduled at a time which will not interfere with my work, and I will not waste time visiting with friends or family while working, or perform tasks that are not related to my work unless explicit permission from my employer is received.
 7. If I satisfactorily finish all work assigned to me, I will immediately seek out additional work from my employer.
 8. When I am on the job, my work comes first. But, if I feel that my studies, family, physical health, or moral well-being are jeopardized because of my job, I will consult with my parents/guardian, my coordinator, and my employer before I resign, giving my employer two (2) weeks notice before I leave.
 9. I will obey all rules and regulations outlined by my employer and my school.
 10. I will sign out daily and submit to my coordinator each Tuesday, a weekly time sheet completed in ink and signed by my employer for the previous week. (Failure to turn in timesheets after three weeks will equal failure of class)
 11. I understand that ACADEMIC FAILURE, poor attendance, or failure to perform all tasks or comply with the rules and regulations of my employer will lead to removal from the program in which case I will be reassigned to school classes.
 12. I will do my best to learn the fundamentals of the field in which I am working.
 13. **I must maintain passing grades in each subject in which I am enrolled. If I fail to maintain a passing grade, an individual meeting with me and the coordinator will be scheduled to examine my current standing; a recommendation to remain in the program will be made. If low grades continue, there may be a two-week suspension from the job site, or I may be dismissed from the program with no credit given. Dismissal from the program will also be considered if I am fired or quit my job or a new job placement is not appropriate at that time. I must notify the School to Work Counselor if I lose my internship.**
 14. If I am absent from school, or have been suspended, I will receive no credit for working in the program on that day unless permission is obtained from the Program Coordinator or building principal.
 15. I will turn in the all the required paperwork for this internship course.

Note: Employer evaluation forms are distributed to each student, completed and signed by each employer, and returned to the Program Coordinator twice a semester for semester students and twice a year for full time students. Review this form so that you know what is being evaluated. Visits or phone calls by the Program Coordinator are made to each job site to discuss each student's job performance. Other visits are scheduled as deemed necessary.

STUDENT AGREEMENT

I realize that to fail at my internship reflects not only on me, but on the others placed within the NHS Internship Program and their opportunities to secure other internship sites. I therefore agree to uphold this agreement and to maintain the reputation of the NHS Internship Program and myself.

Student Signature

Date
