Department of Ethnic Studies
Internship Agreement

Student Information

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<th>Last:</th>
<th>First:</th>
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<tbody>
<tr>
<td>Student ID:</td>
<td>Phone:</td>
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<tr>
<td>Mailing Address:</td>
<td>City:</td>
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<tr>
<td>State:</td>
<td>Zip:</td>
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<td>Email:</td>
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Organization Information

<table>
<thead>
<tr>
<th>Name:</th>
<th>Supervisor’s Name:</th>
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<tbody>
<tr>
<td>Address:</td>
<td>Phone:</td>
</tr>
<tr>
<td>City/State/Zip:</td>
<td>Email:</td>
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</tbody>
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Work Schedule

Start Date:               End Date:               
Number of Hours (Weekly): Number of Hours (Semester):  
Number of Credits: 
Is the internship paid? Yes  No  
If yes, what is the compensation:  
Please list days and times of work scheduled or indicate if hours will be varied.

☐ Check here if varied and approved by supervisor.

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<th>Sunday</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
<th>Saturday</th>
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**Job Description**
(Student should complete this section with their organization supervisor).

*Please describe your job duties while at this organization.*

Please describe how your job duties fit with your academic objectives.

*Please list three personal goals you have while working with this organization.*
**Internship Responsibilities and Requirements:**

By signing below the *student* understands that they are responsible for the items listed below.

1. Following all processes and procedures of the hiring organization.
2. Perform all internship duties in a responsible and professional manner.
3. Completion of all internship class work as outlined in the syllabus.
4. Completion of all committed work hours, as scheduled and listed above.
5. Submission of the Student Evaluation of Organization the last week of class.
6. Ensure that the Supervisor completes an evaluation of student work and submits it to the Internship Director during the last week of classes.
7. Understand their insurance coverage and responsibilities.
8. Contact the Internship Director if any changes are made during the internship process.

The Student is responsible for ensuring that all work is completed and satisfactory to the requirements of the internship program to receive credit.

By signing below the *organization* understands that they are responsible for the items listed below.

1. Provide information and training to the student intern.
3. If the internship is paid, provide the student intern with accident/injury insurance coverage under the organization’s Worker’s Compensation, Employer’s Liability, and/or Professional Liability policies.
4. Ensure that the internship helps the student intern to meet their academic objectives.
5. Provide adequate feedback and supervision to the student intern.
6. Completion and submission of a student evaluation form during the final week of the scheduled internship.
7. Hold CSU harmless for any actions taken on the part of the intern during their participation in the internship.

By signing below the *CSU department representative* understands that they are responsible for the items listed below.

1. Provide the organization with copies of the Internship Handbook, this agreement once signed, and a list of faculty including their contact information.
2. Invite members of the organization to visit and/or with the Ethnic Studies Department at CSU whenever necessary.
3. Have the Internship Director for the Department of Ethnic Studies available to both the student and organization for consultation whenever necessary.
Internship Insurance Guidelines

Off-Campus Internships:

The student is covered under CSU workers’ compensation program if the internship they are participating in is unpaid and they do not receive any remuneration for their labor. The student is covered by the host’s (organization’s) worker’s compensation or insurance program if the student receives any remuneration, including pay, room, or board, while working for the host organization. The above only applies to internship participation in organizations off-campus.

CSU Internships:

The student is not covered by CSU workers’ compensation if they (student) receive no remuneration. If the student is paid through CSU payroll, the student is covered by CSU workers’ compensation program. If the student is working on campus but paid through an off-campus organization, the student is not covered by CSU workers’ compensation. The above only applies to internship participation in organizations on CSU’s campus.

Optional Internships:

This internship program is considered optional and as such is not covered under either the Governmental Immunity Act. C.R.S. 24-10-101 et.seq, or the State of Colorado self-insurance liability protection under C.R.S. 24-30-1501 et seq. If liability insurance is required by the cooperator covering the acts or omissions by you (the student), private coverage will have to be obtained at your expense.

By signing below, you acknowledge that you understand the insurance and workers’ compensation policies as they pertain to the specific internship.

Signatures

Student: ________________________________ Date: _______

Supervisor: ______________________________ Date: _______

Internship Director: ______________________ Date: _______

Revised September 2015