

CTE Internship Training Agreement

Student Name _____ Phone _____ Email _____

Street _____

City _____ State _____ Zip _____

Date of Birth _____ Student ID # _____ HS Attending _____

Employer Name _____ Telephone _____

Employer Address _____ State _____ Zip _____

Intern works how many Days per week _____ Hours per day _____ Start time _____ End time _____

Intern Occupation Title _____

EMPLOYER'S RESPONSIBILITIES: The employer agrees to place the intern in the work specified above for the purpose of providing occupational experience of instructional value. The work activity will be under the supervision of a qualified supervisor. The intern will receive the same consideration given employees with regard to safety, health, social security, general work conditions and other policies and procedures. The employer will adhere to all State and Federal Regulations regarding employment, child labor laws and minimum wages, and will not discriminate in employment policies, educational programs or activities for reasons of race, sex, color, religion, national origin, marital status, age or handicap. **Student Intern must be covered by the company Workman's Comp policy and hired as an employee.**

INTERNSHIP TEACHER/COORDINATOR'S RESPONSIBILITIES: The internship teacher/coordinator agrees to visit each trainee at the training station and will continue a close working relationship with the person to whom the intern is responsible while on the job. The internship teacher/coordinator shall attempt to resolve any job performance complaints through cooperative efforts of all parties concerned. The internship teacher/coordinator will keep each intern's Training Agreement on file for a minimum of three (3) years.

PARENT'S/GUARDIAN'S RESPONSIBILITIES: Parent and/or guardian agree for the student to participate in the internship opportunity provided by Brevard Public Schools. The parent/guardian is to encourage and verify the student's regular attendance and promptness at school and on the job. The parent/guardian will arrange a method of transportation to be used by the student traveling to and from school and the job site.

INTERN'S RESPONSIBILITIES: The intern agrees to follow rules and guidelines established by the internship coordinator and the Employer with regard to hours of work, school attendance, and reporting procedures.

Addendum 1- COVID-19

Students agree to follow recommended CDC COVID-19 guidelines for Social Distancing, Face Mask Protection and Hand Sanitizing and any other protective measures established by employer.

ALL SIGNATORIES AGREE TO COMPLY WITH THE RESPONSIBILITIES SPECIFIED IN THE TRAINING AGREEMENT.

Student Date

Internship Teacher/Coordinator Date

Parent or Guardian Date

Employer Date

Copies of the signed training plan must be submitted to the Internship Teacher/Coordinator and the Office of Career and Technical Education, Attn: Anne Everly or email to Everly.Elizabeth@brevardschools.org or call 321-633-1000 Ext. 11383