BEREA COLLEGE INTERNSHIP PROGRAM

AGREEMENT FOR SUMMER 2021 STUDENT INTERNSHIPS

Before initialing and filling out applicable fields below, listen to the recorded overview of the Agreement from Internship Director Esther Livingston here: <u>Agreement Overview Video</u>

This Agreement is between Berea College and the Berea College Student named below (the "Student"), who is participating in a summer internship, either in-person or remotely. The purpose of this Agreement is to clearly identify responsibilities and expectations of both parties as they relate to the internship experience. Both parties acknowledge, agree to, and understand the following:

The Student must complete an *Internship Planning Form* and an *Experience Request* in Handshake based on the offer from the agency, business, or other organization providing the internship opportunity (the "Organization"). The Student must then obtain approval for course credit by the appropriate academic department, international Student advisor (as applicable), and the Office of Internships.

If the Student is requesting financial assistance ("Internship Grant") in connection with the internship experience, Student must request such assistance directly with the College's Office of Internships. Not all internships are eligible for grant assistance. All decisions regarding eligibility and amounts of assistance are made by the Office of Internships. Any such arrangements are outside the scope of this Agreement.

- The Student may choose to participate in in-person, remote, or hybrid internships. In-person and hybrid internships will only be approved if the Organization meets requirements, or industry-specific requirements, recommended by the CDC for health and safety during the COVID-19 pandemic. This includes enforcing social distancing of 6 feet or more, requiring face coverings, ensuring proper sanitation of work areas, and requiring interns and employees to quarantine and/or work remotely after a positive COVID test (if they are well enough) or after a close contact with a COVID-positive person.
- A copy of this Agreement and the *Internship Planning Form*, will be emailed to the site supervisor at the Organization for the Organization's documentation and information purposes prior to the Student's start date.
- The *Internship Planning Form* identifies and provides contact information for the Student, Organization, site supervisor, faculty sponsor, and Office of Internships.
- The Student understands and agrees that as an intern, the Student is not an employee of the Organization or the College, and is not entitled to financial compensation, employee benefits, workers' compensation, unemployment compensation or covered by other laws and regulations governing the rights of employees.
- The Student represents to the college and the Organization that the Student is able to travel, live and work independently during the full term of the internship, subject to any caveats or restrictions that Student has disclosed in writing and agreed to by the College's Director of Internships and the Organization.
- 1. In addition to the foregoing, the Student agrees to [all statements must be checked]:

to confidentiality. _____

€.	Perform the internship and academic assignments described in the <i>Internship Planning Form</i> to the best of the
	Student's ability, and to the satisfaction of the supervisor and the faculty sponsor respectively
ο.	Follow all rules, procedures, and personnel policies of the Organization and be particularly mindful of those related

C.	Obtain the Organization's written approval before posting anything on social media regarding the Organization, its culture, operations, employees, or clients/customers. A Student whose internship duties include making social media posts agrees to only post on the Organization's social media with the Organization's approval		
d.			
e.	Follow safety precautions related to COVID-19, including but not limited to wearing a face covering, social distancing, and quarantining or working remotely after a positive COVID test (if well enough) or after a close contact with a COVID-positive person		
f.	Fully accept the increased health risks related to travel, housing, and work during the COVID-19 pandemic, and releases the College from any liability in this regard		
g.	Be responsible for the Student's own medical insurance while enrolled in the internship		
h.	Have auto insurance as required by law, if driving a personal vehicle for commuting, and understands that, under no circumstances, should the Student provide transportation in Student's personal vehicle for employees or clients of the Organization		
i.	Grant permission for the College and the Office of Internships to use the Student's name, photo, major, and internship site for informational and promotional purposes in written materials, presentations, social media, and online		
j.	Grant permission for College faculty and staff to access Student's academic and financial information pertaining to the internship as deemed necessary for informational and reporting purposes		
k.	Provide the contact information for person(s) to be contacted by the college or the Organization in the event of an emergency involving the Student (see page 3 of this Agreement) and complete any off-campus travel forms required by Berea College Public Safety		
2. The	Student further agrees that [all statements must be checked]:		
a.	Student is responsible for decisions about living and travel arrangements, as well as any necessary medical treatment, including treatment for COVID-19		
b.	In the event emergency medical care becomes necessary and the Student is unable to secure it, the College may be notified and an official representative of the College's Office of Student Life <i>may</i> , but is not obligated to, secure medical treatment on the Student's behalf, including but not limited to surgery and the administration of an anesthesia. In such circumstances, the Student accepts and agrees to be personally responsible for the costs of all such treatment and care. Neither the College nor its representative shall be responsible for the availability or quality of any emergency medical care		
C.	Neither Berea College, the Office of Internships, the Organization, nor any representative of the college or the Organization, is responsible for the costs of any medical treatment incurred on Student's behalf. In the event that either the college, or the Organization, or any representative of the college or the Organization make (in their sole and absolute discretion, without any obligation whatsoever) any interim financial arrangements or advance on the Student's behalf in consideration of medical treatment, such arrangements or advance shall not be deemed to be a waiver of this provision and the Student remains ultimately and primarily responsible for all costs of any necessary medical treatment on Student's behalf		

d.	_	e internship pr	is solely responsible for any and all costs arising out of voluntary ior to its completion, including withdrawal caused by illness or ion				
e.		•	to the Berea College Student Code of Conduct throughout the line under the Student Judicial Code of the College				
f.	and study outside of the regular pro or at Student's request. The Student	ograms and servent understand	ernship is an exercise in independent living, internship activity vices of the College and that it has been arranged by the Student, s that any extracurricular activities and travel in which Student not considered part of the internship and are at the Student's				
g.	g. The Student understands that the college and the Organization have no responsibility whatsoever for Student personal conduct, health or safety during the term of the internship, except as expressly set forth in the agreement. In the event the internship is with an Organization selected by or arranged through the College, College agrees to exercise ordinary care in such selection or arrangements but disclaims any responsibility for actions or conduct of the Organization, its employees, clients or third p						
3. The	College agrees to:						
a.	a. Provide academic supervision of the internship course, have pre- and post-internship meetings with Studen evaluate the internship and learning experience.						
b. Provide counsel to the Student in the event of special problems that are disclosed by the Student to the							
C.	ompletion of the internship as described in the <i>Internship</i>						
entire		een the College	on the offer form provided by the Organization) constitute the and the Student with respect to the internship. This Agreement the Commonwealth of Kentucky.				
			recorded overview video referenced at the beginning of this ne terms of this Agreement.				
STUDE	NT:						
 Signati	ure	Date	Printed Name				
COLLE	GE:						
Signati	ure	Date					

STUDENT'S EMERGENCY CONTACT INFORMATION:

Name:		Relationship:	
Address:			
City/State/Zip:			
Primary Phone: ()		
E Mail:			

OFFICE OF INTERNSHIPS CONTACT INFORMATION:

Esther Livingston, Director; Sara Cornett, Coordinator; Nicole Ingold, Administrative Assistant Berea College Internship Program, Office of Internships and Career Development 308 Stephenson Hall, CPO 2136, Berea, KY 40404 www.berea.edu/icd internships@berea.edu (859) 985-3656