



Internship Program

23 Ward Avenue, Westerly, Rhode Island 02891

Internship Coordinator: Donna M. Welch 401-742-5348 or dwelch@westerly.k12.ri.us

CTE Director: Kevin Cronin 401-315-1531 or kcronin@westerly.k12.ri.us

General Requirements for Internship Supervisor / Work Site:

- ❖ Place students in a positive working environment where skill development is emphasized
- ❖ The intern must be provided with the opportunity to become an integral part of the daily activities of the organization
- ❖ Provide necessary safety instructions and protective equipment
- ❖ Follow Child Labor Laws
- ❖ The mentor/supervisor must make the intern aware of the professional and ethical standards regarding their position.
- ❖ The mentor/supervisor must make the student aware of any potential risks inherent in working at the internship site
- ❖ The mentor/supervisor is required to complete the internship evaluations of the student intern (Quarterly Student Evaluation Form)
- ❖ Provide the school and students with feedback on learning and performance
- ❖ Sign Internship Workplace Agreement
- ❖ Maintain contact and discuss any questions or concerns with the Internship Coordinator

Detach this first page of the packet and give it to your Internship Supervisor once they agree to participate in the program, so they have our contact information and the General Requirements for the Internship. Note: The placement must first be approved by the Internship Coordinator, and it needs to be scheduled by your Guidance Counselor into your upcoming schedule.

WHS Internship Program Overview

Student internships allow our learners to work in an area of interest, such as a specific industry, business, or occupation, in order to deepen their skills and understanding of the field chosen.

While developing both academic and career skills, our interns will demonstrate our 5 foundational Student Learning Objectives:

Communicating Effectively, Critical Thinking, Research, Problem-Solving & Self-Reflection

Internship Positions Available: Internship opportunities are available in most areas of study. If scheduled into an independent internship, students are responsible for creating their own internship experience within the program guidelines. However, if needed, support is available. After determining individual career interests, students will collaborate with the Internship Coordinator to discuss learning goals and locate a suitable internship placement. Transportation to and from the internship site is the responsibility of the student or the student's parent.

If part of the Career Seminar/Exploration courses, students will receive support in finding an appropriate internship and have access to transportation to and from their internship site.

General Information: Interns are expected to work between 5 and 10 hours per week during each semester the student is enrolled in the internship. Interns receive academic credit upon submission of all assessments, log sheets, and reflections. All interns are subject to applicable employee rules and the RI Department of Labor and Training guidelines for the employment of minors.

Internships can be arranged within a business organization, an independent contractor, a community or non-profit organization, or even within the school district.

Application Procedures: Candidates must complete an application packet and submit it to the Internship Coordinator. All application items must be submitted as a complete package. Incomplete applications will not be reviewed.

Mentor Evaluation: The site mentor/supervisor is the critical judge of how well the intern handles responsibilities and develops professionally during the semester. Feedback from both the mentor and the intern will be essential for the Internship Coordinator to make an accurate final assessment. The intern will continuously communicate with the site mentor/supervisor regarding the achievement of the internship objectives.

Internship Grading

The independent internship grade is pass/fail. The following will be considered as part of the grade: submission and assessment of student log sheets, mentor/supervisor evaluations, student self-reflections, and internship projects. The Career Seminar/Career Exploration courses are traditionally graded courses (A-F).

The intern will meet with the Internship Coordinator as needed and submit daily log sheets. At the end of the semester, the student will be scheduled to meet with the Internship Coordinator about their learning goals, completion of log sheets, and a discussion surrounding the final reflection.

General Requirements for Students:

- All students must attend his/her internship on the assigned dates and times.
- Students are welcome to log additional time at his/her internship, after school hours.
- All internship dates/times will align with the WPS Academic School Calendar.
- Students must self-report absences by calling his/her internship supervisor.

A completed packet includes the following:

- Internship Contract
- Workplace Agreement
- Internship Application Form
- Medical Information Form
- Transportation Agreement (as applicable)

Expectations:

- Students must submit a log sheet on assigned internship days. A Google Form Log Sheet will be shared with the intern and should be submitted back to the internship coordinator daily.
- The Intern must have the STUDENT APPLICATION FORM approved before starting the program.
- The Intern must present the mentor with the mentor responsibilities list (pages 1 & 2 of the application) after approval of the internship by the Internship Coordinator
- The Intern must conduct himself/ herself professionally and act ethically and responsibly in accordance with the standards set forth by the employer.
- The Intern will complete the end-of-semester self-reflection.

General Requirements for Parent/Guardian:

- ❖ Sign the Internship Contract
- ❖ Sign Workplace Agreement
- ❖ Complete the Transportation Agreement and submit a copy of your current car insurance card
- ❖ Complete the Medical Information Form
- ❖ Support the student's attendance and commitment to the internship program

WESTERLY HIGH SCHOOL

Internship Contract

The independent internship placement is graded as pass/fail. Career Seminar and Career Exploration are traditionally graded courses.

Students must fulfill the following requirements to receive a passing grade and credit:

- Students must submit a daily log sheet. Log Sheet Google Forms will be shared with the student through the Remind application and submitted to the Internship Coordinator as assigned
- The Intern must have the STUDENT APPLICATION FORM approved before starting the program
- The Intern must present the mentor/supervisor with the mentor responsibilities page. (Pages 1 & 2)
- The Intern must conduct themselves in a professional manner and must act ethically and responsibly in accordance with the standards set forth by the employer
- The Intern will complete the end-of-semester self-reflection

_____ Student Name - Printed	_____ Student Signature	_____ Date
_____ Parent/Guardian Name - Printed	_____ Parent/Guardian Signature	_____ Date
_____ Internship Coordinator Name - Printed	_____ Internship Coordinator Signature	_____ Date

WESTERLY HIGH SCHOOL

INTERNSHIP APPLICATION FORM

To be considered for an internship, you must submit a signed and completed application form. All application items must be submitted as a complete package. Incomplete applications will not be reviewed.

Please indicate which semester you are applying for: Fall Semester _____ Spring Semester _____ Full-year _____

Employment History *(Includes paid, volunteer, and intern positions)*

Most Recent Employer: _____ Address: _____

Telephone Number: _____

Supervisor : _____ Position Title: _____

Description of duties:

Start Date: _____ End Date _____

Next Recent Employer: _____ Address: _____

Telephone Number: _____

Supervisor : _____ Position Title: _____

Description of duties:

Start Date: _____ End Date _____

References

Name: _____ Telephone Number: _____

Company/School: _____ Know how long: _____ Relationship: _____

Name: _____ Telephone Number: _____

Company/School: _____ Know how long: _____ Relationship: _____

Name: _____ Telephone Number: _____

Company/School: _____ Know how long: _____ Relationship: _____

**Westerly High School Student Internship Program
Student Medical History**

Student: _____ **Year of Graduation:** _____ **Guidance Counselor:** _____

The following health history, including limitations, is requested to give individuals the attention that might be needed:

Difficulty with: Vision _____ Hearing _____ Does student require access to medication? _____

Any restriction to activity for medical reasons? _____

Health Insurance Company _____

Policy Number _____

I hereby authorize the school to secure emergency medical treatment & I will assume all financial responsibility:

Yes _____ No _____

Consent for treatment of a Minor:

I, _____, being the parent/guardian of _____,

Give my consent for pre-employment or routine physicals, required laboratory work, immunizations, and x-rays of this minor. In addition, I give my consent for work-related emergency medical and surgical treatment for this minor if such treatment becomes necessary. I grant my permission for treatment in a licensed hospital by a licensed physician and the physician's assistant and designees, including such hospital personnel as the physician may deem necessary. I understand that hospital personnel will make reasonable attempts to contact me before initiating hospital emergency treatment.

I am aware that the practice of medicine is not an exact science and that no guarantees can be made concerning the results of treatment. The minor named in this consent may receive all treatment provided according to generally accepted standards of medical practice, with the following limitations (if none, write none please). _____

My consent is effective for the minor's duration of this school-based and work-based learning activity, and/or until the minor reaches eighteen years of age, or becomes an emancipated minor. I will assume all financial responsibilities.

Signatures of Parent/Legal Guardian: _____ Date: _____

Internship Program
Student Medical History Continued

Home Address of Parent/Legal Guardian

(Please Print)

Workplace of Mother/Legal Guardian

Name

Name

Street Address

Street Address

City State Zip

City State Zip

Phone Number

Phone Number

Additional Emergency Contact

Workplace of Father/Legal Guardian

Name/Relationship

Name

Street Address City State Zip

Name of Workplace

Phone Number

Phone Number

Family Doctor/Health Care Provider

Name

Phone Number

Westerly High School Internship Program

TRANSPORTATION AGREEMENT

I give permission for my son/daughter: _____
(Print full name)

to drive to their Internship learning site using his/her own vehicle. I realize the car's registration, inspection, and insurance must be valid and available upon request. The student assumes all responsibility, and the school and its representatives will be held harmless in case of an accident. **Note: Students are not allowed to take other students as passengers during school hours (state law).

OR

I give permission for my son/daughter _____
(Print full name)

to be transported in the work vehicle to or from a worksite, or back to Westerly High School, depending on the time of transport. The student assumes all responsibility, and the Internship site, school, and its representatives will be held harmless in case of an accident.

OR

I agree to provide transportation for my son/daughter _____
(Print full name)

to their internship learning site.

Parent/Guardian's Signature

Date

Car Registration

Automobile Insurance Provider

Automobile Insurance Policy Number

Insurance Co. Phone Number

× Copy of current Insurance Card and Registration provided to Internship Coordinator - **Students cannot begin driving to their internship placement until ALL documents are received by the Internship Coordinator.