

Butler University
Student Internship/Experiential Education Agreement

Students must submit this completed form to the internship coordinator when registering for credit. It must be submitted **prior** to beginning the internship. Entering into this Agreement is in consideration of Butler University ("University") considering the internship requested by the student and as a condition to the student's participation in same.

I, _____, ID# _____ am a student at the University and request the opportunity to undertake an internship/experiential education experience during:
 Fall Spring Summer 1 Summer 2, 20____ at the following location: _____

How did you learn about this internship opportunity? _____

Employer Name: _____ Contact Name: _____ Title: _____

Department: _____ Contact Email: _____

Address: _____ City: _____ State: _____ ZIP: _____

Phone: _____ Website: _____

Starting Date: _____ Ending Date: _____

Title of Internship: _____

This Internship is: unpaid paid. If paid, compensation is as follows: _____

This Internship is: credit bearing (list course number): _____ non-credit bearing

Learning Objectives* (What I intend to learn):

Learning Tasks & Strategies* (How I intend to achieve my objectives):

Evaluation & Learning Outcomes* (How faculty will evaluate my progress and performance):

*Attach additional documents, as appropriate.

Expectations during your internship

1. Honor your commitments. If you say you will do something, do it.
2. Present yourself in a positive manner at all times. Appearance should always be neat, punctuality is expected, and be prepared for each assignment that is given.
3. Try to work through solutions to issues in the workplace on your own, but inform your advisor or internship coordinator of any work related issues.
4. Treat everyone with respect. Never burn bridges that will hurt your chances of future employment with this or other employers.
5. Communicate often and effectively with supervisors and co-workers on the job.
6. Ask your supervisor to evaluate your performance at the midpoint and end of your experience.
7. Learn as much as you can during this time. The experience will help you prepare for the future.
8. If you are completing the internship for credit, you should register for the appropriate internship course for your major during the semester you are completing the experience and also, complete any assignments/evaluations required.

The student should take appropriate precautions, based on his/her personal health and other circumstances, to ensure that the experience does not pose an undue health or other risk to him/her. The student understands that any experience or associated travel carries with it potential hazards which are beyond the control of the University and its agents or employees.

The student understands that the sponsor is to provide a valuable learning experience in a professional business environment. Accordingly, the University encourages each student to advise it as soon as possible if the experience does not meet his/her expectations in any manner, or if any issue occurs at the sponsor's site that interferes with his/her experience.

The student understands that if he/she uses his/her personal vehicle for the benefit of the entity which sponsors the experience, the University has no liability for personal injury or property damage which may result from that use. The student agrees to rely solely on his/her personal vehicle insurance coverage and not on any insurance provided by the entity sponsoring the internship.

The student understands that he/she will not be entitled to unemployment compensation benefits upon completion of the experience. Further, he/she understand that the University assumes no liability for personal injury which he/she may suffer in the course of his/her internship. Moreover, it is his/her responsibility to ascertain whether the entity sponsoring the experience provides workers compensation coverage for him/her.

Personal Conduct/Termination of Participation

The student understands that the responsibilities and circumstances of the experience may require a standard of professional decorum. Therefore, the student indicates his/her willingness to understand and conform to the professional standards of the site as well as the terms of the University Rules of Conduct and any rules of conduct adopted by the applicable college or University program. The student agrees that should the internship/experiential learning coordinator (“coordinator”) decide, in his/her sole discretion, that the student must be terminated from his/her experience because of conduct that might bring the experience into disrepute or jeopardy or which violates the University's Rules of Conduct or other rules applicable to him/her, that decision is final and may result in the loss of academic credit and forfeiture of tuition. The student also understands that the University may terminate his/her participation in the experience for other reasons it deems appropriate, in its sole discretion. The student also understands that he/she may face University disciplinary action for violation of the Rules of Conduct or other applicable rules at the site or other property owned or operated by the sponsoring entity.

General Release

I, _____, being of legal age (18 or older), have requested that Butler University (“the University”) allow me to participate in an internship/experiential education experience (“the Internship”) or which participation I will receive college credit. I understand and acknowledge that I am not required to participate in the Internship and that my participation is wholly voluntary. I further understand and acknowledge that the University does not control in any manner the way in which the Internship or the Internship Site is structured or operated. While the University believes that the Internship is an appropriate curricular option for students and worthy of University credit, it makes no warranties, express or implied, as to the manner in which the Internship or the Internship Site is structured or operated. In consideration of the University’s agreement to permit me to participate in the Internship for credit, the receipt and sufficiency of which consideration is acknowledged, I agree as follows:

1) I, individually, and on behalf of my heirs, successors, assigns and personal representatives, release, acquit and forever discharge the University and its employees, agents, officers, trustees and representatives (in their official and individual capacities) from any and all liability whatsoever, including liability for the University’s own negligence, for any and all damages, losses or injuries (including death, mental anguish or emotional distress) to persons and/or property, including but not limited to any claims, demands, actions, causes of action, damages, costs, expenses (including hospital and medical expenses or deductibles) and/or attorney’s fees, that occur during, result from, arise out of or relate to my participation in the Internship.

2) I, individually, and on behalf of my heirs, successors, assigns and personal representatives, agree to indemnify, defend and hold harmless the University and its employees, agents, officers, trustees and representatives (in their official and individual capacities) from any and all liability, loss or damage directly or indirectly associated with any claims, demands, actions, causes of action, judgments, costs, expenses and/or attorney’s fees, that occur during, result from, arise out of or relate to my participation in the Internship.

3) I represent and warrant that I shall be covered throughout the Internship by a policy of comprehensive health and accident insurance which provides coverage for injuries which I may sustain as part of my participation in the Internship.

4) I acknowledge and accept that there are certain risks, both known and unknown, inherent in my participation in the Internship. I have knowingly and voluntarily decided to assume the risks of these inherent dangers in consideration of the University’s permission to allow me to participate in the Internship.

5) I agree that this Waiver, Release and Indemnification Agreement is governed by the laws of the State of Indiana and is intended to be as broad and inclusive as permitted by the laws of the State of Indiana. If any portion hereof is held invalid, I agree that the balance hereof shall, notwithstanding, continue in full legal force and effect. I agree that exclusive jurisdiction concerning this Waiver, Release and Indemnification Agreement shall be in the courts of Marion County, Indiana or in the U.S. District Court for the Southern District of Indiana.

6) By signing this Waiver, Release and Indemnification Agreement, I acknowledge and represent that I have read this entire document, that I understand its terms and provisions, that I understand it affects my legal rights, that it is a binding agreement, and that I have signed it knowingly and voluntarily.

Student Signature: _____ Date: _____

Experience Sponsor Signature: _____ Date: _____

University Representative Signature: _____ Date: _____

The University Representative and Experience Sponsor may keep copies of this document.

Updated: 6/2007