

Butler University
Student Internship Agreement

Students must submit this completed form to the internship coordinator prior to beginning the internship.

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

Starting Date: _____ Ending Date: _____

This internship is ____ unpaid ____ paid.

If paid, compensation is as follows: _____

This internship is ____ credit bearing ____ non-credit bearing.

Butler University does not control the way in which the internship experience (“experience”) is structured or operates. In granting academic credit for this experience, the University affirms that, to the best of its judgment, the experience is an appropriate curricular option for students and worthy of University credit, but makes no assurances, express or implied.

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/community environment. Accordingly, the University encourages each student to advise the internship coordinator 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.

Insurance Coverage

The student has sufficient health, accident, disability and hospitalization insurance to cover him/her during the experience. The student further understands that he/she is responsible for the costs of such insurance and for the expenses not covered by this insurance, and understands that the University does not have an obligation to provide him/her with such insurance.

The student assumes full responsibility for his/her undisclosed physical or emotional problems that might impair his/her ability to complete the experience, and he/she releases the University from any liability for injury to him/herself or damage to or loss of his/her possessions.

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 understands 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 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

The student understands that the University reserves, in its sole discretion, the right to cancel, change, or substitute experiences in cases of emergency, changed conditions, or in the general interest in the internship/experiential learning program. The student understands that the coordinator may take any actions he/she considers warranted under the circumstances to protect his/her health and safety and/or to guard the integrity of the experience, including termination of the internship experience. The student realizes that the coordinator has no express or implied duty to ensure his/her health or safety. The student also releases and waives any rights or claims that he/she may have relating to or arising out of the release of any and all information and records about the experience to University representatives, and hereby authorize the site sponsor to release such information and records as may be requested by the University from time to time.

It is further expressly agreed that the site and its use of any and all facilities shall be undertaken by the student at his/her sole risk and the University shall not be liable for any and all claims, demands, injuries, damages, actions, or causes of actions whatsoever to him/her or to his/her property arising out of or connected with the experience, whether or not sponsored by the University. The student releases, discharges, and promises not to sue the University, its governing board, employees or agents as to any and all liability excepting liability due to the willful or misconduct of the University.

Student Signature _____ Date: _____

University Internship Representative _____

Title _____

University Representative Signature _____ Date: _____