

INTERNSHIP AGREEMENT

This agreement should be completed by county employees assigned to supervise an intern as well as by every intern performing an internship with Salt Lake County (regardless of whether they are in a paid or unpaid status).

Interns are individuals currently enrolled or recently graduated from high school, trade school or an accredited college or university who perform internships from which they will gain knowledge, skills, networking opportunities, and/or further understanding of a particular industry from on-site experience. In some cases, interns might also earn academic credit.

To be completed by the intern’s supervisor:

Intern name	
Agency name	
Agency supervisor information	
Internship title	
Internship duration (start date AND end date)	
Internship primary activities	
Anticipated Total Hours	
Intern contact information	
Will this internship be paid or unpaid?	
If paid, what is the hourly rate	\$
Is this internship for academic credit? Yes / No	
If yes, please provide the number of credit hours, documents received from your advisor and your advisor’s name and contact information	
Intern's weekly schedule	
Please list tentative dates when you intend to meet with the intern	

Please list at least three learning objectives to be achieved during this internship below.

1. _____
2. _____
3. _____

NOTE: It is expected that as the supervisor, you will provide guidance, evaluation and feedback to your intern in order to facilitate the learning process.

To be completed by the intern:

If I am offered an internship with Salt Lake County, I agree to complete the required training and to conduct the internship activities in a professional manner and to the best of my ability. I will be responsible for communicating any scheduling needs or internship issues with my supervisor. And I will expect to receive frequent and constructive feedback about my performance.

For Unpaid Interns Only: While receiving training, the undersigned *unpaid* intern, authorized by the Division Director, shall be deemed an employee of Salt Lake County only for the purpose of the following liabilities and insurance coverage.

- A. Properly licensed operation of County vehicles or equipment
- B. Workers Compensation for Interns not contractually covered by their schools (generally any non-medical related internship)

*Students in Nursing or other medically related specialties are provided workers compensations by their school.

For Paid Interns Only: As a *paid* intern, I am eligible to receive worker's compensation benefits for any injuries sustained while in the performance of county internship.

If I, as a Salt Lake County intern, will be driving on county business or transporting clients while using my personal vehicle, in the event of a car accident, I shall immediately contact my own insurance carrier and report the accident; damages due to accidents must be covered by my own insurance carrier. If I am involved in an accident while on County business I must also file a report with County Risk Management according to Salt Lake County Wide Policy 1011, Accident Reporting. Upon request, the County Volunteer Coordinator will provide assistance to complete this report.

The internship may be terminated at any time, without cause, without notice, and without a pre-termination hearing. The internship is related to an educational purpose and there is no guarantee or expectation that the internship will result in employment with the County. An unpaid intern is not an employee. A paid intern is considered an employee under the FLSA; however, the paid intern is not a merit employee, but rather an "at-will" employee. Interns are not eligible for County benefits unless required by law.

I have read and understand the sexual harassment prevention & ethics training and discrimination information (Initial) _____.

I have read and understand all the Countywide policies and agree to comply with them during my internship (Initial) _____.

I have read and understand all the County Human Resources Policies and agree to comply with them during my internship (Initial) _____.

If necessary, I have submitted a Statutory Ethical and Disclosure form (Initial) _____.

RELEASE OF CLAIMS

With an understanding of the County's legal obligations and my rights as an intern, the undersigned intern, hereby releases Salt Lake County, its agents and employees from any and all existing or possible actions, causes of action, claims, demands, damages, costs, fees, and expenses of any kind, known or unknown, on account of or in any way arising from or related to the internship, or any County decision or action related to the internship other than stated above.

Intern Signature: _____

Parent or Guardian signature if under 18: _____

Signature of Agency Representative: _____ Date: _____

Salt Lake County is an equal opportunity employer providing internship and employment opportunities without regard to age, race, gender, ethnicity, religion, national origin, sexual orientation or disability.