This form must be signed by: EMPLOYER INSTRUCTOR DEAN



Intern Request Form

Completed forms can be submitted to careers.internship@cfk.edu

Employer Name:		
Address:		
City:		
State:	Zip:	
Contact Person:		
Contact Title:		
Phone:	Fax:	
Email:	Web Address:	
Today's Date:	Expected Date to Interview:	
Academic or Career Internship:	Expected Start Date:	

Job Title:

Job Description (Please be specific and attach a page if necessary.):

Minimum Qualifications/Skills:

Rate of Pay: per HOUR MONTH YEAR Unpaid

Number of Available Intern Positions:

Best Days/Hours for Intern to work:

(*Internships must last a minimum of one semester)

Could this become a permanent position? YES NO

How did you learn about The College of the Florida Keys Internship Program?

Please review expectations and sign on pages 2 and 3 75.74(*C*) Intern Request Form

EMPLOYER EXPECTATIONS

The following expectations will assist in maximizing the internship experience for the business and will ensure an efficient and effective process for working with The College of the Florida Keys (CFK) student.

The employer will adhere to the hiring practices of their business including completion of appropriate paperwork and training.

The employer will ensure that the intern is aware of all written and unwritten workplace protocol and procedures, rules, standards, and practices.

The employer acknowledges students are accountable for work in other courses and will provide a reasonable and flexible work schedule.

The employer will identify a company mentor to supervise and develop the intern's work progress.

The employer will maintain contact with the CFK Internship Coordinator or faculty member to provide feedback on how the placement is progressing.

The employer will notify the CFK Internship Coordinator as soon as possible if a problem develops with the intern's performance, or if the intern resigns or is terminated from the internship.

The employer will complete the Employer Evaluation Form upon completion of the internship.

The employer shall maintain all required insurance and worker's compensation coverage on the intern. Interns are not covered by The College of the Florida Keys' insurance policy.

The employer shall remain in compliance with all federal and state anti-discrimination laws, including the Americans with Disabilities Act, regardless of the intern's unpaid or paid status.

Authorized		
Signer:	 	

Name (Please Print):______Date:_____

Title:

Important information for all unpaid internships:

According to the U.S. Department of Labor, unpaid internships for non-profit charitable organizations, where the intern volunteers without expectation of compensation, are generally permissible (2010).

The following six criteria must be applied when making this determination:

- 1. The internship, even though it includes actual operation of the facilities of the employer, is similar to training which would be given in an educational environment;
- 2. The internship experience is for the benefit of the intern;
- 3. The intern does not displace regular employees, but works under close supervision of existing staff;
- 4. The employer that provides the training derives no immediate advantage from the activities of the intern; and on occasion its operations may actually be impeded;
- 5. The intern is not necessarily entitled to a job at the conclusion of the internship; and
- 6. The employer and the intern understand that the intern is not entitled to wages for the time spent in the internship.

If all of the factors listed above are met, an employment relationship does not exist under the FLSA, and the Act's minimum wage and overtime provisions do not apply to the intern. This exclusion from the definition of employment is necessarily quite narrow because the FLSA's definition of "employ" is very broad. Some of the most commonly discussed factors related to "for-profit" private sector internship programs are outlined in the website referenced below.

Source: U.S. Department of Labor www.dol.gov/whd/regs/compliance/whdfs71.pdf

I have read and understand the requirements for an unpaid internship.

Authorized	
Signer:	
Name (Please Print):	Date:
Title:	
For CFK Internal Use, Employer/Organization pl	ease do not fill out this section:
Internship Site Approved YES NO	
Subject Matter Expert:	Date:
Dean:	Date: