

Today's Date: _____

2022-2023 Internship Application

Oakdale High School - Work Based Learning Program

This application is the first step in completing your enrollment in the Mentor/Internship program for next year. Interns students represent Oakdale High School and will help maintain our reputation of excellence within the business community.

Your internship site must be approved by your WBL Coordinator. Your coordinator is available to **assist** you in finding an internship site. However, **it is the student's responsibility to secure the internship**. You may need to meet with your coordinator to put together a resume and make some phone calls. As a participant in the program you agree to keep your internship site for the entire semester, and your mentor must meet all the requirements for the site to qualify.

Directions: Complete this application and submit it to **Mrs. McGrew**, the WBL Coordinator, at amanda.mcgregor@fcps.org or Room B153.

Please print all information:

Name:	Current Grade:
Student's Phone Number:	
Student's Email address (Non-FCPS):	
Internship Schedule Preference: **Must intern a minimum of 7.5 hours a week for each credit (or block) Check all that apply <u>Fall 2022:</u> <u>Spring 2023:</u> Block <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 4 <input type="checkbox"/> 5 Block <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 4 <input type="checkbox"/> 5	
What type of internship experience are you looking for?	
Do you have a specific mentor or location in mind? _____ If so, please complete the following: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> Name of Business: Supervisor Email: </div> <div style="width: 45%;"> Location: Supervisor Phone: </div> </div>	
Briefly explain this site and relation to your future career/goals:	

For each of the following statements, mark yes if you understand or no if you do not agree or want additional information.

I understand that the internship site will:

- be established and licensed, yes no
- take income taxes and F.I.C.A. from my earnings (if paid), yes no
- operate within all employment laws, yes no
- require me to have a work permit (if paid), yes no
- have worker's compensation insurance, yes no
- schedule me for at least the minimum number of hours required yes no
- agree to schedule me for appropriate hours yes no
- may also schedule me for some evenings and weekends, and yes no
- not allow me to work on any day I am absent/suspended from school
(including lates to school and leaving early). yes no

I understand I will be scheduled as an intern at the start of semester if I have met all the following requirements:

- completed an Internship Application, yes no
- have a career related interest related internship site & mentor by the deadline, yes no
- have my driver's license or have it by _____ (provide date), yes no
- have my own transportation yes no
- have a Mentor-Internship agreement signed by me, my parent/guardian,
and employer returned to the coordinator by the deadline. yes no

By signing below, I indicate that I understand and agree to ALL the expectations listed above. Each student will be scheduled to interview with Mrs. McGrew in May/June. Following the interview, notification for approval will be distributed prior to the end of the school year.

Student Signature: _____ **Date:** _____

Parent/Guardian Name(s): _____

Parent Signature: _____ **Date:** _____

Please return application within 2-3 days of reception