

Quince Orchard HS – Off-Site Internship Plan

Student's Name _____ ID # _____

Location/Placement _____ Triple Pd Double Pd

Feel free to use a separate piece of paper or another form that addresses the areas below as long as both the mentor and intern sign on the plan.

ACTIVITIES - At this internship the intern's...

Daily Duties/Activities may/will include:

Weekly Duties/Activities may/will include:

Other Duties/Activities may/will include:

CONTACT

In the event of an emergency or an absence, the following procedure will be used for the Intern to contact the mentor:

Phone number to call: _____

Email address to send an email to: _____

If the mentor is not directly contacted at the time, the absence can be reported to the person at the number or email address below and that person can relay the message to the mentor:

Name _____

Mode of Contact _____

DISCUSSION

The following items need to be discussed between the mentor and intern so that expectations are clear and responsibilities are defined, some of these items will be used when the intern is evaluated at the end of each quarter.

- Attire for the workplace
- Attendance expectations (including time of arrival, time of departure, process for signing in)
- Communication process (phone, email, when/how to contact)
- Workplace space (locations of items, areas to enter/not enter)
- General discussion of what the mentor expects out of the experience and what the intern expects out of the experience

****I, the mentor, confirm by signing below that I have worked with the intern in developing this work plan, we have discussed the duties that he/she has, how to contact me, and we have discussed the items listed above.***

Mentor's Name (print) _____

Mentor's Signature _____ Date _____

****I, the intern, confirm by signing below that I have worked with my mentor in developing this work plan, we have discussed the duties that I have, how to contact my mentor, and we have discussed the items listed above.***

Intern's Signature _____ Date _____