

Mentorship/Internship Program: Business Application

Business Name: _____

Contact: _____

Address: _____

City, State, ZIP: _____

Telephone: _____ FAX: _____

Email: _____

Industry: _____

Nature of Position: _____

Position Description: _____

Estimated hours requested per week (High School Maximum 4, College Maximum 10): _____

Immediate Supervisor name: _____ Position: _____

Is the supervisor willing to educate the intern about the industry and position? Yes No

Is the position project oriented? Yes No

Does the position require that the intern be 18 years of age? Yes No

21 years of age? Yes No

Will the position require transportation while on the job? Yes No

Are there any special requirements for the position? Yes No

(If Yes, please explain): _____

Are you interested in have a: High School Student College Student Either

Are you interested in coaching a disabled student? Yes No

I, _____ am authorized by the company listed above to commit to this contract, and hereby hold a position open for an intern through the San Diego North Educational Foundation until notice is given to SDNEF Staff. I hereby agree to provide the position described above and will retain that position for the duration of the internship once started (a period of three months). Termination of the intern must be given with reason, in writing to SDNEF and to the student. Business will hold harmless, the San Diego North Educational Foundation, any damages caused by interns provided through SDNEF.

Authorized Signature: _____ Date: _____

Print Name: _____

Foundation Coordinator: _____ Date: _____

Print Name: _____