

**\*\*Due to Mrs. Sieg at jusieg@gasd-pa.org by August 1 for the Fall Semester and December 1 for the Spring Semester\*\***

## **Career Internship Contract**

Gettysburg Area High School  
1130 Old Harrisburg Road, Gettysburg, PA 17325  
Contact: Justine Sieg

**\*\*Please complete the ENTIRE application in blue or black ink and write neatly. \*\***

Student Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Current GPA: \_\_\_\_\_ (find this on your latest report card – MUST be a 70% or higher to participate in this program)

Career Internship Facility Name: \_\_\_\_\_

Address of internship location: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_ Supervisor Phone: \_\_\_\_\_

Supervisor Email: \_\_\_\_\_

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## **Career Internship Intention Statement**

**Career Internship:** Junior and Senior students may arrange their own internships in off-campus work sites related to their career goal. Transportation is the responsibility of the student.

**Student will earn 1 credit for successful completion of the program.**

### **Explanation of Career Interest**

In a few sentences, share you career goal and why this internship is important to you.

### **Explanation of leaning experiences:**

As discussed with my mentor, I expect to be involved in some of the following learning experiences during the internship (be specific).

- 1.
- 2.
- 3.
- 4.

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**GAHS Student, please take this to your internship supervisor and go through questions 1 – 5 with him/her.**

1. Choose the timeline of your internship opportunity. A semester course runs a total of 19 weeks. Term courses run a total of 9 weeks.
  - a. **Please circle** the opportunity you would like to provide for your intern student:
    - i. Semester 1 – August 22 – January 12
    - ii. Semester 2 – January 16 – May 24
    - iii. Term 1: August 22 – October 25
    - iv. Term 2: October 26 – January 12
    - v. Term 3: January 16 – March 20
    - vi. Term 4: March 21 – May 24

***\*\*\*Student – if the supervisor is providing a Term 1, 2, 3, or 4 experience, YOU are responsible for filling the other term session. You will need a separate packet for this. \*\*\****

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- b. If you would like to rotate the student around to different departments/people during the internship, that will be fine. Please indicate how you plan on doing this in the space provided.

(Example: Student is going to be with you for Semester 1, but will be with \_\_\_\_\_ from August 22 – October 25(term 1) and then with \_\_\_\_\_ from October 26 – January 12 (term 2)).

There are a lot of different options, but please clarify your plans so the internship supervisor knows where to go and who to look for upon visitations.

2. **Please indicate** the appropriate time frame that the student will be with you during this experience. This should be a conversation you've had with the student, which has been approved by his/her counselor on their schedule. This verifies they have it scheduled at the correct time and also your expectations of time(s) they should be with you.

a. **Days/Time of internship experience:** \_\_\_\_\_

3. The **supervisor** of the student intern is required to initial each of the statements below:

- a. I will provide a variety of work assignments and supervise my student intern at all times, while he or she is here. \_\_\_\_\_
- b. I will fill out a periodic evaluation of job progress, which will be provided by the supervising teacher of the program. \_\_\_\_\_
- i. Can this evaluation form be emailed to you? Yes No
- ii. If yes, what is your email address? \_\_\_\_\_
- c. If any problems arise, I will contact the supervising teacher immediately. \_\_\_\_\_
- d. I will provide necessary safety instruction throughout student training period. \_\_\_\_\_
- e. I will not employ a student to displace a regular worker. \_\_\_\_\_
- f. Work in hazardous areas incidental to training shall be for short periods of time and supervised by a qualified person. \_\_\_\_\_
- g. Employer will provide an environment free of sexual/other harassment with applicable clearances. \_\_\_\_\_

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4. The supervising teacher can be reached at (717) 334-6254, ext. 6168 or via email at jusieg@gasd-pa.org. If I have any questions/concerns/issues, I will contact her immediately. \_\_\_\_\_
5. If the student is absent from his/her internship, I will email Justine Sieg at jusieg@gasd-pa.org on the same day as the absence. \_\_\_\_\_

**Student Responsibilities- Please initial each of the statements below:**

1. Student agrees to perform the assigned duties in a loyal manner and work to the best interest of all concerned. \_\_\_\_\_
2. Student agrees to report job problems to training supervisor and GAHS coordinator. \_\_\_\_\_
3. Student will adhere to company policy; employment may be terminated for the same reasons regular employees. \_\_\_\_\_
4. Student must be regular in attendance at school and on the job. If unable to report to work, the employer and GAHS coordinator (Mrs. Sieg) will be notified before the start of the normal work day. \_\_\_\_\_ You are REQUIRED to email Mrs. Sieg in the case of any absences from your internship. If you miss more than 3 days, you will be removed from the program, and will not receive any credit. \_\_\_\_\_
5. Student's employment/internship will be terminated upon withdrawal or graduation from school. \_\_\_\_\_
6. Student is responsible for the provided folder with weekly assignments, etc. This is REQUIRED to complete on a weekly basis and drop off with Mrs. Sieg each Monday of the following week. \_\_\_\_\_

We, the undersigned, agree to the conditions and statements contained in this agreement.

_____	_____	_____
Student (Print)	Student Signature	Date

_____	_____	_____
Parent (Print)	Parent/Guardian Signature	Date

_____	_____	_____
Intern Supervisor (Print)	Signature	Date