

Required Paperwork DUE: June 5

The following documents are required and are also available on Edmodo (Library, Shared with Me, Required Paperwork). Please read all of the directions and **complete your portion before meeting with your employer**. Submit all at once.

1. The Montgomery County Public Schools **Memo of Understanding (MOU)** (3 copies)

- Fill out the top portion of the form with your name, the company name, and the company address.
- Read the form. On the back, sign and date the form. Have your parents sign and date it.
- Bring it to your sponsor and have him or her sign it.
- Submit 3 signed copies to me. (I will sign them upon receipt and will return two copies to you at the start of the school year. Bring one copy to your sponsor and keep one for yourself.)

2. A **work permit** (if you will be under 18 when you begin your internship)

- a. If you will be **working in Maryland**, use the “Application for a Work Permit for a Minor.” You can download the Maryland form from this site

<http://www.dllr.state.md.us/labor/wages/empm.shtml#minorinst>

- Complete your section.
- Have your Employer complete the Employer section.
- Have your parent sign it.
- Use the data that is on the form to complete the online application.**
- Take the application, the online Application Receipt and your Proof of Age to an Issuing Officer (Mrs. Parmelee in the College and Career Center) and request a work permit.**
- Submit one copy to me and one copy to your Employer. Keep one for yourself.

OR

- b. If you will be working in DC, complete the “District of Columbia Public Schools Official Work Permit and Child Labor Application.” (You can download DC form from this site:

<http://careers.cua.edu/job-list/WorkPermit.cfm>)

- Have your parent or guardian complete Part B.
- Ask your employer for a “letter of intent to employ.” This can be a short letter saying they plan to have you as an intern during the 2013-2014 academic year. It should also indicate the nature of the employer’s occupation, the number of hours per day and the days per week which you will work. When you go to pick up the letter, bring the work permit with you. Have the employer complete Part C.
- Locate a DC High School that can process your permit. Call ahead to find out the hours and to make an appointment.**
- Bring your birth certificate, Social Security Card and an “Intent to Employ on letterhead from prospective employer.”
- The “issuing officer” at the DCPS will complete Part A and stamp the document.
- Submit one copy to me and one to your employer. Keep a copy for yourself.

3. The **Job Description**

- Please see the sample and the template.
- Before you go see your sponsor or send this to him/her, go on Edmodo and get an electronic copy of the template. Complete all of the sections except “Main Function of Intern” and “Brief Description of Duties.” Delete anything that is in italics and replace it with your information.
- When you meet with your sponsor, ask for a brief description of duties, in the form of a bulleted list. You or your sponsor may handwrite these or type them.
- Be sure to have the sponsor sign and include all contact information.
- Sign it and have your parents sign it.
- Submit one copy to me. Keep a copy for yourself.

4. The “**Application to Participate in an Activity Away From School for Which Transportation is Not Provided**”

- Complete Part I. Be sure to indicate how you plan to get to your internship.
- Have your parents complete and sign Part III.
- Submit one copy to me.

5. Fill out the online survey of student and employer contact information (see link on Edmodo)

https://docs.google.com/forms/d/1MkcBljPXV50gzguM-TZXpNcxFJJupFtAtvRMfw_2E4U/viewform

Paperclip the documents together and submit them to me in B131 all at once in this order:

- MOU (3 copies)
- MD or DC Work Permit (If you will be 18 prior to the start of the internship and don’t need one, write a note on an 8 ½ by 11 inch piece of paper that says, “I am 18” and submit that paper.)
- Job Description
- Application to Participate in an Activity Away From School for Which Transportation is Not Provided

After the start of the school year but prior to the start of your internship, you will also need to submit the following, which will be distributed in class:

The Site Info and Directions.

- Be sure to include specific work hours and door to door directions, including information about parking.
- Save the file -- you’ll need to submit this to me electronically and via hard copy during the first week of the semester.

Emergency Contact Info (3 copies)

- Complete this and give one copy to me, one to your sponsor, and one to your parents.

**MONTGOMERY COUNTY PUBLIC SCHOOLS
DIVISION OF CAREER AND TECHNOLOGY EDUCATION
INTERNSHIP PROGRAM
MEMORANDUM OF UNDERSTANDING
OBLIGATIONS OF PARTICIPANTS**

	Bethesda-Chevy Chase High School
Student Name	High School Name
Sponsor Organization	Sponsor Address

A. HIGH SCHOOL INTERN agrees to fulfill the following program obligations:

Duration: Participate in the program for a complete academic term, on-site with the sponsor and attending scheduled group seminars with intern coordinator and fellow student interns.

Transportation: Arrange own transportation to and from the intern site.

Home School: Maintain contact with the home school to determine any responsibilities the intern has there.

Meetings: Attend meetings and conferences with the site sponsor. Seek prior briefing on agenda, participants, and the role of the intern in the meeting.

Hours Worked: Learn the school procedure for recording hours worked and regularly report them.

Work Habits: Demonstrate good attendance and grooming, accuracy, orderliness, promptness, maturity, appropriate dress and proper business etiquette and professionalism.

Initiative: Seek additional responsibilities in the organization to enhance the learning experience.

Sponsor Conferences: Meet regularly with the sponsor to review learning experiences, seek advice on challenges, and clarify assignments.

Journals: Write a daily analytical log of internship activities focusing on personal reactions to program experiences and documenting what new knowledge and skills have been acquired. Submit the journal to the coordinator on a weekly basis.

Seminars: Attend scheduled seminars.

Assignments and Projects: Complete all assignments and projects as assigned by intern coordinator. Assignments and projects may be subject to review by the sponsor at the end of the internship.

B. SPONSOR agrees to fulfill the following program obligations:

Worker Compensation: Section 7-114, Education Article, Annotated Code of Maryland, requires that employers include students in unpaid work-based learning experiences as employees for purposes of coverage under the state worker compensation laws. Montgomery County Public Schools does not provide coverage for students.

Sex Offender Registrants: Section 11-722(c), Criminal Procedures Article, Annotated Code of Maryland, requires that any person who enters into a contract with the Montgomery County Public School Board of Education may not knowingly employ an individual to work at a school if the individual is a registered sex offender. Since an MCPS student will be working in your business or organization as part of his/her school program, you agree that you will not knowingly employ a registered sex offender at any worksite in which a student is placed.

Internship Plan: Work with the MCPS coordinator to prepare an individualized student work plan.

Supervision: Provide daily supervision or designate someone to do so.

Attendance: Verify student attendance. Notify the MCPS coordinator when student is absent without prior approval or for any other situation requiring attention.

Assessment: Make time available at the end of each 9-week term to evaluate the intern.

Summary: Review and sign off on the intern's summary of the internship experience.

Regulations: Adhere to the regulations of the Fair Labor Standards Act.

C. PARENT OR GUARDIAN of the intern agrees to meet the following obligations:

Work Habits: Reinforce the need for good attendance and the development of good work habits.

Transportation: Assure that the intern has transportation to and from the internship site.

Support: Provide encouragement and reinforcement.

Communication: Maintain contact with the coordinator about any program-related problems.

D. COORDINATOR agrees to fulfill the following program responsibilities:

Academic Progress: Work with student and school personnel to monitor student's academic progress.

Objectives: Coordinate and monitor the internship experience on a day-to-day basis to assure that the program achieves the stated goals.

Policies: Inform the intern, sponsor, and parent or guardian about the purposes and policies of the program at the beginning of the term.

Site Visits: Make regular contacts with the sponsor to review the quality of the internship and the intern's development in the program, to suggest necessary changes in approach, and to follow-up on recommendations. These contacts may be in the form of electronic mail, on- and off-site visitations, or teleconferencing.

E. CONNECTING ACTIVITIES: INTERN, SPONSOR, COORDINATOR

Training Plan: Jointly develop a plan whereby the intern will use and improve the academic skills he or she already has while learning new skills.

Organizational Overview: The sponsor will provide the intern with activities that provide a comprehensive view of the organization and focus on the roles, responsibilities, and functions of the organization. The intern will undertake these activities and seek insight into the qualities, skills, and knowledge that help an executive or manager perform effectively.

Assignments: Jointly define special assignments for the intern to meet the educational objectives of the program.

ACADEMIC CREDIT POLICY

The program is a demanding experience requiring analytical skills and mature judgment, the ability to function independently, written and oral communication skills, understanding of complex management elements, and comprehension of new knowledge. The program lasts a minimum of one academic term (18 weeks) and may necessitate longer hours than a student would ordinarily spend in the classroom.

Student signature	Date	MCPS Coordinator signature	Date
Parent signature	Date	Parent signature	Date

STATE OF MARYLAND
1100 N EUTAW STREET - BALTIMORE - MARYLAND - 21201
DIVISION OF LABOR & INDUSTRY
DEPARTMENT OF LABOR, LICENSING & REGULATION

APPLICATION FOR
WORK PERMIT FOR A MINOR

Directions For The Minor

First Name: _____
Last Name: _____
Street Address: _____
City: _____
County: _____
State: _____
Zip Code: _____
Home Telephone: _____
Date Of Birth: Month: ____ Day: ____ Year: ____
School Name: _____

1. Complete your section of this application. Type or print and make sure it is legible. Use your correct legal name.
2. Have your Employer complete the Employer section.
3. Have your parent or guardian sign this application.
4. Use this data to complete the on-line application at: www.dlir.state.md.us/labor/emp/m.shtml

For Proof of Age - You may use:
Birth Certificate
School Records
Valid Maryland Driver's License
Any official Government document.

5. Take this Application, the online Application Receipt and your Proof of Age to any Issuing Officer and request Maryland Minor Work Permit.
6. Deliver the official Work Permit to your employer.

* A new permit must be obtained for each job *

Directions for the Employer

1. Complete your section of this application and return it to the minor for validation.
2. Do not allow minor to work until the official work permit is in your possession.
3. Work permits are not transferable and are required until the minor's 18th birthday.

Company Name: _____
Street Address: _____
City: _____
County: _____
State: _____
Zip Code: _____
Telephone: _____
Telephone Extension: _____
Employer Rep Name: _____
Employer Rep Signature: _____
Work Duties: _____

- Select - Type of Business
- _____ Accommodation & Food Services
 - _____ Administrative & Waste Services
 - _____ Agriculture, Forestry, Fishing & Hunting
 - _____ Arts, Entertainment & Recreation
 - _____ Construction
 - _____ Educational Services
 - _____ Finance & Insurance
 - _____ Health Care & Social Assistance
 - _____ Information
 - _____ Management of Companies & Enterprises
 - _____ Manufacturing
 - _____ Mining
 - _____ Other Services except Public Administration
 - _____ Professional & Technical Services
 - _____ Public Administration
 - _____ Real Estate & Rental & Leasing
 - _____ Retail Trade
 - _____ Transportation and Warehousing
 - _____ Unknown
 - _____ Utilities
 - _____ Wholesale Trade

Directions for the Parent or Guardian Please sign and date the knowledge and consent statement.

This minor is being employed at the place of work described above with my full knowledge and consent. I hereby certify that, to the best of my knowledge, the information herein is correct and true. I request that a work permit be issued for the above named minor.

Signature of Parent or Guardian

Date

Directions for the Issuing Officer

1. Verify the minor has signed and dated the correct and true statement below.

I hereby certify that, to the best of my knowledge, the information herein is correct and true.

Signature of Minor

Date

Control Number

2. Do not accept an incomplete application.
3. The Division of Labor and Industry requires you retain this application in your file for 3 years from date of issue.

Date of Issue

**DISTRICT OF COLUMBIA PUBLIC SCHOOLS
OFFICE OF YOUTH ENGAGEMENT**

**Official Work Permit and Child Labor Application
NOT OFFICIAL UNLESS SCHOOL STAMP or SEAL AFFIXED**

8

Date of Application _____

Work Permit Number _____
Date Issued _____

A. To be completed by issuing officer			School:			
Name and Address of Minor (Please Print) _____ _____ _____	Date of Birth			Signature of Issuing Officer _____ Date _____		
	Month	Day	Year	A copy of (3) Required Documents received from applicant:		
	Sex (M/F) _____			_____ Birth Certificate _____ Social Security Card		
_____ Intent to employ on letterhead from perspective employer						
B. To be completed by parent, guardian or legal custodian						
I, the parent, guardian or legal custodian of the above-named minor, request the issuance of an employment certificate as indicated below: (Please select only one)						
_____ Regular Work Permit		_____ Vacation Work Permit			_____ Theatrical Work Permit	
Please print address below: _____						
_____ Telephone Number: _____						
Signature of Parent, Guardian, or Legal Custodian: _____ Date: _____						
C. To be completed by prospective employer: Please attach a letter of intent to employ on company letterhead.						
The undersigned expects to employ the minor as _____ in the industry of _____						
(type of work) (type of industry)						
The minor will work during such times and in accordance with the maximum hours permissible by law as established by the U.S. Department of Labor - Child Labor Regulations.						
Hours of Employment for minors Ages 14 & 15: Minors may not work before 7 AM or after 7 PM, EXCEPT June 1 st through Labor Day when they may work until 9 PM.				Employer: Within the limitations as identified in "Hours of Employment," please fill out the following:		
Hours of Employment for minors Ages 16 & 17: Minors may not work before the hour of 6 AM or after 10 PM at any time (including weekends). Minors under 18 years of age may NOT work more than 8 hours in any one day or more than 6 days in a week, for a total of 48 hours in a week. Minors under 18 should not work during school hours if enrolled.				Sun. Mon. Tue Wed Thur Fri Sat		
PROHIBITED EMPLOYMENT: Minors 14 and 15 years of age may NOT be employed (1) in the operation of any power machinery or the oiling, wiping, or cleaning of machinery (other than standard office machinery) or (2) on any construction site including office work performed on the actual construction site. Minors under the age of 18 may NOT be employed (1) working in any quarry, tunnel or excavation, (2) operating any freight, or non-automatic elevator, or (3) in any establishment that serves alcoholic beverages.				____ hrs ____ hrs ____ hrs ____ hrs ____ hrs ____ hrs		
				Maximum hours: per day ____ per week ____		
				Name, address and telephone number of employer: _____ _____ _____ Zip _____		
				Signature of Manager: _____		
D. Theatrical Permit Applicants: This section is to be completed by examining physician. If the minor is under 16 years of age, please attach to this application the completed Certificate of Physical Fitness signed by the examining physician along with the Application for Theatrical Work Permit.						
I hereby certify that the minor listed on this form has been thoroughly examined and:						
_____ is physically qualified for the employment specified in the statement of the prospective employer.						
_____ is physically qualified for the period of _____, after which time a new examination is required.						
_____ is physically qualified with the following limitations: _____						
Signature of Examiner: _____				Date: _____		
Address of Examiner: _____						

Internship Job Description (Student and Sponsor Complete)

Name of Student Intern:

Company:

Description of Company:

Main Function of Intern:

-

Brief Description of Duties:

1)

2)

3)

4)

Address of Company:

Dates, Times and Length of Position

- Hours per week: *(6 for single period, 10 for double, 15 for triple)*
- Start Date: September 8
- End Date: May 15
- Specific hours: *(Note, you and the sponsor can determine the exact hours. Be sure to allow yourself enough time to get there after you leave school.)*

Sponsor/Immediate Manager:

(Name)

(Position)

(Department)

(Phone)

(FAX)

(Email)

Sponsor Signature: _____

Date: _____

Student Signature: _____

Date: _____

Parent Signature: _____

Date: _____

Name of Intern: First Last



Description of Company: NASDAQ OMX is the world's largest exchange company with trading, technology and public company service capability spanning 6 continents.

Main Function of Intern:

- Work with Office of General Counsel Staff to review data and systems, which support Nasdaq's regulatory program, and perform research to support regulatory initiatives

Brief Description of Duties:

- Perform user acceptance testing of compliance related systems
- Perform quality control verification of financial data processed by third-party vendor
- Assist in production of updates to department procedures manuals
- Perform research to support existing or proposed regulatory initiatives

Location

9600 Blackwell Road
Rockville, Maryland 20850

Dates of Position

- 10 hours a week
- Commencing September 9 and continuing until May
- Monday – Friday, 1:00-3:00 p.m. *(Note, you and the sponsor can determine the exact hours. Be sure to allow yourself enough time to get there after you leave school.)*

Sponsor/Immediate Manager:

- (Name)
- (Position)
- (Department)
- (Phone)
- (FAX)
- (Email)

Sponsor Signature: _____

Student Signature: _____

Parent Signature: _____



APPLICATION TO PARTICIPATE IN AN ACTIVITY AWAY FROM SCHOOL FOR WHICH MCPS TRANSPORTATION IS NOT PROVIDED

MCPS Form 560-31
October 2012

MONTGOMERY COUNTY PUBLIC SCHOOLS
Rockville, Maryland 20850

PART I: To Be Completed by Sponsor Student

Student Name _____ Date 1/1

School Bethesda-Chevy Chase High School Grade _____

Date(s) to be excused from classes: 09, 08, 14 05, 15, 15 From end of 1st class - end of To work
a.m./p.m. a.m./p.m. day

Reason (describe activity) School Approved Internship 2014-2015 Academic Year

For transportation in connection with this activity I will: (check one)

- Use public transportation facilities Ride in a car driven by a fellow student. Name of Driver _____
 Drive my own or my parents'/guardians' car with no passengers. Other (specify) _____
 Drive my own or my parents'/guardians' car with _____ (number) passengers.

PART II: To Be Completed by Principal/Designer

The student named above may be excused to engage in the activity described above.

The activity is is not school-sponsored. School Staff Sponsor (if applicable) Stacy Farrar, Internship Coordinator

The attendance will be recorded as: Present Absent (other codes are also used)

Jaren Lockard
Signature, Principal/Designer

3, 10, 14
Date

PART III: To Be Completed by Parent, Legal Guardian, or Eligible Student

Read carefully before signing. The Board of Education of Montgomery County and its servants, agents, and employees does not insure transportation as described in PART I. The school system does carry liability insurance, which, under terms of the coverage, may apply to a school-sponsored activity. In no case would coverage be provided for activities designated as non-school-sponsored. The owner of the vehicle must carry bodily injury insurance of \$100,000 per individual or \$300,000 per accident.

I as parent (or legal guardian) of the student named above, or as eligible student, give permission for the named student to be transported in the manner described in PART I.

I as parent (or legal guardian) of the student named above, or as eligible student, give permission for the named student to participate in the above-described activity.

I release, acquit, forever discharge, and agree to and do indemnify and save harmless the Board of Education of Montgomery County and its servants, agents, and employees from any and all future liability resulting from any and all claims or causes of action which I now or may in the future have for personal injuries, damage to property, loss of services, medical expenses, and losses or damages of any and every kind whatsoever that may arise from the transportation to and from the activity described above. If this is a non-school-sponsored activity, I understand that this release also applies to participation in any non-school-sponsored activity.

PARENT FINANCIAL RESPONSIBILITY

The Montgomery County Public Schools (MCPS) and Bethesda-Chevy Chase High School wish to advise parents and guardians of the potential financial responsibility they may incur in the event that the activity named above is cancelled, delayed, interrupted, or revised.

A decision may be made by the school or by MCPS, in accordance with the MCPS School Travel Policy, to cancel the trip for safety or other reasons. In the event of such a cancellation, the trip operator's cancellation policies, as well as those of the hotels, bus companies and others providing services in connection with the trip, will determine the amount of any refund to which you are entitled, if any. This will depend upon the date any cancellation occurs. As you would expect, the closer to the date of the trip that a cancellation occurs, the more likely you will receive a smaller refund due to non-refundable payments made by the trip operator to others on your behalf. Please note that, while trip operators generally will make every effort to minimize your financial exposure in the event of a cancellation, we are unable to anticipate the amount of any refund at this time should the trip be cancelled.

In addition, please be advised that, for safety or other reasons, the trip may be delayed or interrupted once it is underway. In that event, it may be necessary for students to remain away for an extended time, thereby incurring additional room and board costs. It may also be necessary to modify itineraries or other travel arrangement, thereby requiring additional transportation costs. Neither MCPS nor Bethesda-Chevy Chase High School will be responsible for any additional costs that may be incurred as a result of any delay, interruption or revision to the trip.

By signing below, parents and guardians acknowledge they have read this notice and accept responsibility for any loss of trip fees due to cancellation and any potential additional costs that may be incurred as a result of any delay, interruption or revision to the trip.

Signature, Parent, Legal Guardian, or Eligible Student

Date

Parent Emergency Phone Number _____

ASSOCIATION TO PARTICIPATE IN AN ACTIVITY
AWAY FROM SCHOOL FOR WHICH
MORE TRANSPORTATION IS NOT PROVIDED
MONITORING CONTINGENT SCHOOL

INFORMATION REGARDING TRAVEL INSURANCE

Although there are many travel insurance providers, the scope and cost of the coverage they provide varies widely. The one consistency, however, is that the cancellation of a school trip by school officials is not a "covered event" under travel insurance policies when the cancellation is purely precautionary. Nonetheless, travel insurance may be helpful should a trip be cancelled, delayed or interrupted due to other causes.

If group travel insurance is unavailable, impractical or inappropriate for a particular trip (e.g. only a small number of students are traveling or the cost of the trip is not substantial), parents may still wish to purchase travel insurance on their own. In such a situation, we recommend that the following statement be included in the letter to parents:

Given your potential financial responsibilities in the event of trip cancellation, delay or interruption, you may wish to consider purchasing travel insurance, which may cover costs arising from such events. The cost of such insurance and the scope of coverage will vary among companies. Please be aware that eligibility to receive cancellation benefits from an insurance company depends upon the circumstances of the trip cancellation. For example, if the school officials canceled a trip, it is most likely that this would not be considered a "covered event" unless it could be proven that cancellation was justified by independent circumstances. But, if the trip was underway and you incurred expenses for additional lodging or transportation, those might be covered. Therefore, we urge you to be sure you understand the scope of your coverage before purchasing any insurance. We do not endorse or recommend any particular insurance company and ask that you handle this on your own. If you are not familiar with companies offering travel insurance, a quick Internet search for "travel insurance" will provide you with numerous names.

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