

Ferris State University - College of Business
Internship Program
Confirmation of Placement Form

Responsibilities of Organization:

1. Designate a staff member to supervise the student and act as a liaison to the College of Business.
2. Establish work schedules which will accommodate the student's academic responsibilities.
3. Relate work assignments as fully as possible to the student's major area of study and make every effort to maximize student's learning from this experience.
4. Provide the student with a clear and inclusive internship description with related learning objectives.
5. Provide an environment that is physically, psychologically, and professionally safe.
6. Notify the College of Business immediately should the need arise for a premature ending of the internship.
7. Notify the College of Business immediately if any problems arise regarding a student's performance or attitude. The College of Business representative will work with you to find the best solutions.
8. Submit a **mid-term** and **end-of-term** employer evaluation detailing the student's progress.

Responsibilities of Student and Assumption of Risk:

1. Be enrolled in a 4-year College of Business degree closely related to the position for which he/she is being considered.
2. Be and remain in good academic standing during the internship.
4. Work at least 240 hours for each 3 credit-hour internship assignment after internship placement is confirmed and accept that additional hours may be required to meet the objectives as outlined in the work plan.
5. Agree that a family member MAY NOT be an immediate supervisor or mentor.
6. Submit all academic work when due and successfully complete all required assignments in order to receive University credit.
9. Notify the College of Business Internship Coordinator immediately if any problems arise with the internship.
10. Submit weekly reports on Monday for the hours completed the week prior.

By signing this document I am certifying that:

- a. I am 18 years of age or older.
- b. I am voluntarily agreeing to participate in the College of Business Internship Program.
- c. I have earned at least a CUMULATIVE 2.0 GPA.
- d. I recognize inherent dangers exist and assume any and all risks associated with my internship position at _____, including transportation to, from, and during my internship.
- e. I am will inform my Department Head of any dangers, risks, or problems that arise at my internship site.
- f. I accept these responsibilities and risks of participating in a College of Business internship experience.

Responsibilities of the College of Business:

1. Aid student in personal and professional development.
2. Inform organization of any change in student's academic status which would affect their internship.
3. Evaluate student's academic work and assign a credit/no credit grade.
4. Be available to students and on-site supervisors to facilitate problem solving.

I have agreed to accept _____ as an intern who will be working a minimum of 240 work hours for each 3 hours of academic credit. I understand he/she will be enrolled in the College of Business Internship Program and will receive credit for work performed while under my supervision. I have reviewed the guidelines stated above and am willing to accept the responsibilities delineated.

Signature of Student _____ **Date:** _____

Signature of Employer _____ **Date:** _____

Signature of Department Head _____ **Date:** _____

Signature of Internship Coordinator _____ **Date:** _____

Complete and submit this form to: College of Business Internship Coordinator, Barbara Renne
E-mail: COBinterns@ferris.edu or Fax: 231.591.2463