

Internship Sponsor Questionnaire



Office of Curriculum and Instructional Programs
 Division of Career and Technology Education
 MONTGOMERY COUNTY PUBLIC SCHOOLS
 Rockville, Maryland 20850

MCPS Form 280-77A
February 2019
Page 1 of 2

Thank you for expressing an interest in participating in the Montgomery County Public Schools (MCPS) Internship Program. In order to ensure that we are able to match a student's career field of interest to your specific needs, you are asked to complete and return this document to the sender as soon as possible. Interns are placed during the spring semester for the following school year. If the form is received prior to the last week in December, there is a better chance of identifying a student and providing you an intern for the following academic school year. Please note all sponsors will be required to read, sign and adhere to the expectations noted on the internship agreement document, found at the following link: <https://www.montgomeryschoolsmd.org/departments/forms/detail.aspx?formID=1571&formNumber=280-77&catID=2&subCatID=0>. You are encouraged to review the program agreement before submitting this form. See below for responsibilities of the INTERNSHIP ORGANIZATION.

Please note, the submission of this form does not guarantee a placement. The information you submit will be shared with school-based Internship Coordinator(s). If a student match is found, you will be contacted and next steps will be shared. Thank you again for your willingness to support the career goals of MCPS students.

1. Name of person completing this form: _____ Title: _____
 What is the official name and address of your business?
 Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
2. What is the name of the MCPS high school(s) in closest proximity to your business?
3. How many students are you interested in sponsoring/mentoring? _____
4. Provide a short description of the duties the intern will be expected to perform?
5. What skills are you expecting the intern to possess? _____
6. Will the Intern be paid? No Yes If yes, how much per week? _____
7. How many people are currently employed to your business? _____
8. How many hours would you like the intern to work per week? _____
9. When would you like for the Intern to start with your company? _____
10. Where is your business situated?
 House Office (building/standalone) Warehouse Garage Other (Specify) _____

The INTERNSHIP ORGANIZATION shall fulfill the following responsibilities

INTERNSHIP PLAN	Work with the School Internship Coordinator to prepare an individualized internship plan.
SUPERVISION	Maintain all appropriate licenses or permits required to fulfill this Agreement, and designate an Internship Site Supervisor who shall be authorized to sign this Agreement and shall provide ongoing supervision for the Student Intern either directly or through appropriately authorized designee(s), provided that the Internship Site Supervisor provides contact information for any such designee(s) in advance to the School Internship Coordinator.
ATTENDANCE	Verify Student Intern attendance, and notify the School Internship Coordinator when the Student Intern 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 Student Intern.
SUMMARY OF INTERNSHIP EXPERIENCE	Review and sign-off on the Student Intern's summary of the internship experience.
ETHICAL CONDUCT WITH STUDENTS	Build positive relationships with the Student Intern to support learning and standards of professional practice, including but not limited to Section 2 of the MCPS Employee Code of Conduct, available on the MCPS website: www.montgomeryschoolsmd.org/ .

WORKER COMPENSATION AND INSURANCE	Maryland law requires that Internship Organizations include Student Interns for purposes of coverage under state worker compensation laws. MCPS does not provide such coverage. The Internship Organization shall be solely responsible for maintaining other appropriate insurance, including, but not limited to, general comprehensive liability insurance.
LIABILITY	Accept responsibility for all claims, actions, damages, liability, and expense that may arise in sponsoring a Student Intern at the Internship Organization's site, including those that arise due to the Internship Organization's negligence or its violation of any applicable legal requirement. MCPS assumes no responsibility for any claim, action, damage, liability, or expense arising from a Student Intern's placement at a Internship Organization's site, including those that arise due to the Internship Organization's negligence or its violation of any applicable legal requirement. For the purposes of this paragraph, MCPS includes the Board of Education, and its officers, officials, agents, employees, and students. Nothing herein or any other provision of this Agreement shall be construed to abrogate, impair, or waive any defense, liability or damages limitation, or governmental immunity of MCPS pursuant to Maryland law, or otherwise.
SEX OFFENDERS	Shall not knowingly employ a registered sex offender at the site where the Student Intern is placed.
COMPLIANCE WITH APPLICABLE LAWS	Comply with labor laws including the Fair Labor Standards Act, 29 U.S.C. Chapter 8; student privacy protections including the Family Educational Rights and Privacy Act ("FERPA"), 20 U.S.C. § 1232g, and all other applicable federal, state, and local laws and regulations. The Internship Site Supervisor shall be responsible for reviewing and assuring compliance with the following Board of Education policies and MCPS regulations, available on the MCPS website at www.montgomeryschoolsmd.org/departments/policy/ : Board of Education Policy ACA, <i>Nondiscrimination, Equity, and Cultural Proficiency</i> ; MCPS Regulation ACA-RA, <i>Human Relations</i> ; Board of Education Policy ACF, <i>Sexual Harassment</i> ; Board of Education Policy JHC, <i>Child Abuse and Neglect</i> ; and MCPS Regulation JHC-RA, <i>Reporting and Investigating Child Abuse and Neglect</i> . (Internship Organizations are encouraged to complete the online training on Recognizing and Reporting Child Abuse and Neglect, available at: www.montgomeryschoolsmd.org/childabuseandneglect/)

I understand that my electronic submission of this form and my electronic signature are intended to be, constitute, and are equivalent to my personal signature.

Internship Sponsor Signature _____ Date ____/____/____