Cumberland Valley High School

Employer Internship Manual
2019-2020
Cumberland Valley School District prohibits discrimination, including sexual harassment, on the basis of race, color, age, creed, religion, sex, sexual orientation, ancestry, national origin, marital status, parenting status, pregnancy or handicap/disability in its activities, programs or employment practices.

The following employees have been designated to handle questions and complaints of alleged discrimination or sexual harassment:

**Compliance Officer:**
Michelle Zettlemoyer, Director of Human Resources  
(717) 506-3339  
mzettlemoyer@cvschools.org

**ADA/Section 504 Coordinator:**
Doris Baboian, Director of Student Services  
(717) 506-3320  
dbaboian@cvschools.org

Individuals with disabilities who require assistance or special arrangements to attend a program or activity sponsored by the Cumberland Valley School District should contact Michael Willis, Director of Business and Support Services at (717) 506-3312 or mwillis@cvschools.org. For TTY, dial 711 for Relay Service.
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INTRODUCTION

Thank you for your interest in hosting student interns from Cumberland Valley High School. This document is designed to provide you with an overview of our internship program.

For further information or to set up an internship with Cumberland Valley students, please contact David Gilbert (dgilbert@cvschools.org), Supervisor of College & Career Pathways, or Terri Consevage (tconsevage@cvschools.org), Career Coordinator.

PROGRAM DESCRIPTION

• Internships

Internships are work-based learning experiences in a particular occupation. They are intended to provide students with the opportunity to explore potential careers to gain a better understanding and appreciation of the field in which they may be interested. Hopefully, students will gain experiences to make informed decisions regarding careers while networking with community businesses, organizations and professions.

Internships are highly structured with specific learning objectives and student performance assessment. Internships can be paid or unpaid. Students are permitted to work during the school day for a semester, academic school year or over the summer. Students’ internship schedules are developed collaboratively by the business, the student, and Cumberland Valley’s Career Coordinator.

Internships are recorded on the student’s high school transcript. One quarter credit is granted by CV for every 30 hours spent at the internship site. Students can earn up to 2 internship credits (240 hours total). Cumberland Valley grades internships on a Pass/Fail basis in consultation with the internship host.

• Job Shadowing

Job shadowing allows a student to directly observe the day-to-day activities a person would perform in a particular job and to learn the skills needed to obtain this career. Job shadowing can be for a day or several days. It differs from an internship in that students do not earn academic credit for the experience as it is less than 30 hours. However, students often use job shadowing to determine career interests and future internship opportunities.
SETTING UP AN INTERNSHIP

1. **Program Development:** When a business decides to offer an internship to Cumberland Valley High School students, the first step is to contact the Career Coordinator to discuss a potential job description and procedures for the internship. This is a collaborative process to determine the best fit for both the business and Cumberland Valley’s students.

2. **Selecting Students:** Once the internship program is developed by the business and CV’s Career Coordinator, the CV Career Coordinator will solicit potential students based on a job description developed for the internship.
   a. Students apply for the opening by submitting a cover letter and resume to the Career Coordinator. These documents are submitted to the employer.
   b. The employer interviews the students to determine if the students meet the company’s criteria and the students understand the employer’s expectations.

3. **The Training Agreement:** The internship is a joint venture between the student, parent/guardian, employer and school. The Career Coordinator oversees the execution of the training agreement and training plan prior to the student beginning the position.
   a. The Career Coordinator will visit the internship site to finalize the training agreement and training plan.
   b. Volunteer clearances must be submitted to the Career Coordinator prior to the first day of work.
DURING THE INTERNSHIP

1. **Required Documentation for CV:**
   a. Students are required to complete a weekly log, which summarizes their experiences. The internship host will sign and submit the log to the Career Coordinator.
   b. The internship host will complete and submit an evaluation form to provide feedback for the intern at least once during the internship.
   c. At the end of the experience, the student will submit a reflection report regarding the experience. This is required in order to earn a passing grade for the Internship Program.

2. **Oversight by CV’s Career Coordinator:**
   a. CV’s Career Coordinator is available to facilitate the process, answer questions and address any issues that may arise throughout the internship.
   b. CV’s Career Coordinator will visit students at their internship site at least once a marking period to observe the student and meet with the internship host.
CONFIDENTIALITY STATEMENT

During the course of a student internship/job shadow, it is common for the student to acquire information that is privileged, confidential, proprietary, or a trade secret to the business in which the student is an intern/employee. By signing below, I acknowledge that I will not disclose, publicize, photocopy, disseminate, or use without express written authorization from the Business/Employer any privileged, confidential, proprietary, or trade secret business information that I may acquire during the course of my student internship/job shadow with said business. Doing so may result in my termination from the internship/job shadow program, as well as disciplinary action as allowable by both District policy and law.

By signing below, you acknowledge receipt of the Confidentiality Statement and agree to abide by it:

_______________________  _______________________  ____________
Student Name (printed)   Student Signature       Date

_______________________  ________________________  ________
Parent Name (printed)    Parent Signature         Date
Clearances for Internships with CV

Federal and State Background Checks and Clearances

The Child Protective Services Law now requires all companies entering into internship agreements with schools to have one adult with volunteer Criminal Background Clearances (child abuse, state police and federal FBI fingerprinting) in the workplace who will be designated as the supervisor/mentor of the student. These clearances are only necessary for supervisors/mentors working with students under 18 years of age.

The designated supervisor/mentor shall be responsible for the student’s welfare while at work. This supervisor must be in the “immediate vicinity” (an area in which he/she is physically present with the student and can see, hear, direct, and assess the activities of the student).

Volunteer clearances will be in effect for 60 months. Supervisors/mentors who have clearances that will be more than five years old as of July 1, 2017, must obtain new clearances. If the supervisor/mentor has continuously resided in Pennsylvania for 10 years AND affirms in writing (please see the Disclosure Statement Application for Volunteers in this document) that he/she has never been convicted of certain disqualifying crimes in Pennsylvania, or equivalent crimes under Federal law or the law of another state, he/she will only need to obtain the child abuse and Pennsylvania state police clearances. If he/she has lived in Pennsylvania for less than 10 consecutive years, a federal FBI fingerprinting clearance is also required.

Cumberland Valley School District is unable to apply and pay for the required clearances on behalf of prospective supervisors/mentors.

How to Obtain Required Clearances

Criminal Background check for State Police: https://epatch.state.pa.us/. The cost is waived for volunteers. Use the “New Record Check” for Volunteers as you are not paid by Cumberland Valley School District.

PA Child Abuse History Clearance can be completed online at: https://www.compass.state.pa.us/cwis/public/home. Use the “Create an Individual Account” and make sure to check off volunteer so there is no fee.

FBI Fingerprint Clearances – This is required if you have NOT continuously resided in Pennsylvania for 10 years. See the information in paragraph 3 regarding this requirement. If you have continuously resided in Pennsylvania for 10 years, please complete the attached form.

- If you need to obtain the fingerprint-based background check, it is a multiple-step process. The cost is approximately $27.00.
The applicant must register prior to going to the fingerprint site. Walk-in service without prior registration will not be provided at any fingerprinting location. Registration can be completed online at https://uenroll.identogo.com or over the phone at 1-844-321-2101 Monday through Friday from 8 am to 6 pm EST.

1. Visit the Idemia (formerly MorphoTrust USA, LLC) website to get started: https://uenroll.identogo.com
2. Enter Service Code (Use code 1KG6Y3 for PA Department of Education (PDE) – Volunteer) and click “Go”.
3. Click on “Schedule or Manage Appointment”.
4. Complete personal information through subsequent screens.
5. Make note of your confirmation number and fingerprinting information.
6. Visit the IdentoGo center of your choice to pay the appropriate fee and have your fingerprinting completed.
7. Once fingerprinted, provide a copy of your confirmation to the Cumberland Valley Career Coordinator. The official Federal Criminal History Record will be available to the Cumberland Valley Human Resources Department online.

Clearances MUST be obtained and submitted prior to a student beginning his/her internship.

Please contact the Career Coordinator at (717) 506-3516 to submit the required clearances.
DISCLOSURE STATEMENT APPLICATION FOR VOLUNTEERS
Required by the Child Protective Services Law
23 Pa. C.S. Section 6344.2 (relating to volunteers having contact with children)

I swear/affirm that I am seeking a volunteer position and AM NOT required to obtain a clearance through the Federal Bureau of Investigation, as:
  • The position I am applying for is unpaid; and
  • I have been a resident of Pennsylvania during the entirety of the previous ten-year period.

I swear/affirm that I have not been named as a perpetrator of a founded report of child abuse within the past five (5) years as defined by the Child Protective Services Law.

I swear/affirm that I have not been convicted of any of the following crimes under Title 18 of the Pennsylvania consolidated statues or of offenses similar in nature to those crimes under the laws or former laws of the United States or one of its territories or possessions, another state, the District of Columbia, the Commonwealth of Puerto Rico or a foreign nation, or under a former law of this Commonwealth.

  Chapter 25 (relating to criminal homicide)
  Section 2702 (relating to aggravated assault)
  Section 2709 (relating to stalking)
  Section 2901 (relating to kidnapping)
  Section 2902 (relating to unlawful restraint)
  Section 3121 (relating to rape)
  Section 3122.1 (relating to statutory sexual assault)
  Section 3123 (relating to involuntary deviate sexual intercourse)
  Section 3124.1 (relating to sexual assault)
  Section 3125 (relating to aggravated indecent assault)
  Section 3126 (relating to indecent assault)
  Section 3127 (relating to indecent exposure)
  Section 4302 (relating to incest)
  Section 4303 (relating to concealing death of child)
  Section 4304 (relating to endangering welfare of children)
  Section 4305 (relating to dealing in infant children)
  Section 5902(b) (relating to prostitution and related offenses)
  Section 5903(c) (d) (relating to obscene and other sexual material and performances)
  Section 6301 (relating to corruption of minors)
  Section 6312 (relating to sexual abuse of children), or an equivalent crime under Federal law or the law of another state.

I have not been convicted of a felony offense under Act 64-1972 (relating to the controlled substance, drug device and cosmetic act) committed within the past five years.
I understand that I shall not be approved for service if I am named as a perpetrator of a founded report of child abuse within the past five (5) years or have been convicted of any of the crimes listed above or of offenses similar in nature to those crimes under the laws or former laws of the United States or one of its territories or possessions, another state, the District of Columbia, the Commonwealth of Puerto Rico or a foreign nation, or under a former law of this Commonwealth.

I understand that if I am arrested for or convicted of an offense that would constitute grounds for denying participation in a program, activity or service under the Child Protective Services Law as listed above, or am named as perpetrator in a founded or indicated report, I must provide the administrator or designee with written notice no later than 72 hours after the arrest, conviction or notification that I have been listed as a perpetrator in the Statewide database.

I understand that if the person responsible for employment decisions or the administrator of a program, activity or service has a reasonable belief that I was arrested or convicted for an offense that would constitute grounds for denying participation in a program, activity or service under the Child Protective Services Law, or was named as perpetrator in a founded or indicated report, or I have provided notice as required under this section, the person responsible for employment decisions or administrator of a program, activity or service shall immediately require me to submit current clearances obtained through the Department of Human Services, the Pennsylvania State Police, and the Federal Bureau of Investigation, as appropriate. The cost of clearances shall be borne by the employing entity or program, activity or service.

I understand that if I willfully fail to disclose information required above, I commit a misdemeanor of the third degree and shall be subject to discipline up to and including denial of a volunteer position.

I understand that the person responsible for employment decisions or the administrator of a program, activity or service is required to maintain a copy of my clearances.

I hereby swear/affirm that the information as set forth above is true and correct. I understand that false swearing is a misdemeanor pursuant to Section 4903 of the Crimes Code.

Name (Print): ____________________________ Signature: ____________________________

Witness (Print): ____________________________ Signature: ____________________________

Date: ____________________________
Training Agreement for Internship Program

Federal and Pennsylvania Child Labor Laws require a Training Agreement for students in a work-based learning environment.

Student Name:___________________________________________________________

Address:________________________________________________________________

Phone Numbers: Home:_________________________ Cell:_______________________

E-mail address:___________________________________________________________

Birth date:__________________ Age:______________ Work permit #:_____________

Career Objective: _________________________________________________________

Parent/Guardian’s Name:_________________ Parent/Guardian’s Cell: __________

*******************************************************************************

Internship Site/Business:__________________________________________________

Mentor name:_________________________ Phone number: ______________________

Address:_______________________________________________________________

E-mail contact:__________________________________________________________

Starting date: _________________________ End date: _________________________

Start and end time of work hours:_________________________________________

*******************************************************************************

Student Responsibilities

1. The student learner agrees to perform the assigned duties in a loyal manner and work to the best interest of all concerned. Confidentiality procedures will be practiced.

2. The student learner must be in regular attendance at school and at the internship site as determined prior to the internship. If the student is unable to report to work, the employer and Career Coordinator must be notified before 9 AM (or earlier depending upon start time of internship) by the student. If the student learner does not attend school, he or she will not attend work that day. Repeated absences will be discussed and could be grounds for termination of the internship resulting in a failing grade.

3. The student learner will adhere to company and school policy. Repeated violations of these policies may result in termination.
4. The student learner and parent/guardian are responsible for transportation and insurance for travel between the school and the internship site, as well as all financial liability incurred as a result of an accident or injury while enrolled in the internship program.
5. The student learner will be covered by insurance, either the Student Accident Insurance package or the parent/guardian’s private insurance coverage.
6. The student learner agrees to report problems/concerns to the mentor and Career Coordinator.
7. The student must complete Weekly Journals, obtain the mentor’s signature and submit journals by Monday of the following week.
8. At the end of the internship, a Reflection Report must be submitted within two days of the last day worked.

**School Responsibilities**
1. The program is under the supervision of a Career Coordinator who will periodically visit the student and training supervisor at the training site.
2. The Career Coordinator will evaluate the student and award academic credit.
3. The school will monitor attendance at school and at the internship site.

**Internship Site Responsibilities**
1. The training agency will adhere to all State and Federal regulations regarding employment and child labor laws. If the internship is paid, adherence to minimum wages and workers’ compensation is expected. The employer is not liable to the unemployment compensation fund for wages paid to the student while under the training program. This is provided in Section 4L4 10C in the Pennsylvania Unemployment Compensation Law.
2. The mentor must submit clearances for PA Child Abuse, PA State Police Criminal Background and FBI prior to the start of internship.
3. The student learner will receive necessary safety instructions.
4. The student learner must not displace a regular worker.
5. The student learner will be given a variety of work assignments and will be supervised by an experienced person.
6. The work site mentor will arrange a conference with the Career Coordinator should a problem arise.
7. The mentor will make periodic evaluations of the student’s progress using a rating form provided by the school.

We, the undersigned, agree to the conditions and statements contained on both sides of this training agreement.

<table>
<thead>
<tr>
<th>STUDENT</th>
<th>DATE</th>
<th>EMPLOYER/MENTOR</th>
<th>DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>PARENT/GUARDIAN</td>
<td>DATE</td>
<td>CAREER COORDINATOR</td>
<td>DATE</td>
</tr>
</tbody>
</table>
TRAINING PLAN FOR THE INTERNSHIP PROGRAM

Student Name: ____________________________ Telephone No.: ________________
Company/Dept.: __________________________ Telephone No.: __________________
Training Supervisor: ______________________ Telephone No.: ________________
Parent/Guardian: __________________________ Telephone No.: ________________
Signatures: Career Coordinator: ______________ Date: ________________
Training Supervisor: ________________________ Date: ________________

List the Competencies the Student Is To Learn On the Job

1. _______________________________________________________________________
2. _______________________________________________________________________
3. _______________________________________________________________________
4. _______________________________________________________________________
5. _______________________________________________________________________
6. _______________________________________________________________________
7. _______________________________________________________________________
8. _______________________________________________________________________
9. _______________________________________________________________________
10. _______________________________________________________________________

Briefly Describe What the Student Will Do to Master the Competencies Listed Above

_____________________________________________________________________________________________
_____________________________________________________________________________________________
_____________________________________________________________________________________________
_____________________________________________________________________________________________
_____________________________________________________________________________________________
_____________________________________________________________________________________________
# Internship Student Evaluation Form

**Student:** __________________________  
**Employer:** __________________________

**Evaluation Period:** __________________________  
**Evaluator’s Signature:** __________________________

**Instructions:** Please place an “X” in the appropriate box for each category that most accurately describes the student’s performance. Evaluate each category without regard to the student’s rating in any other category. Upon completion, discuss the evaluation form and areas for improvement with the student. Please return the form to Mrs. Consevage in person (via the student) or email. Thank you.

<table>
<thead>
<tr>
<th>Category</th>
<th>EXCELLENT</th>
<th>AVERAGE</th>
<th>UNSATISFACTORY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attendance/Punctuality</td>
<td>10</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>Consistently on time, prepared to work</td>
<td></td>
<td></td>
<td>Frequently absent and/or tardy, unprepared to work, does not handle absences professionally, not compliant with company and policy standards</td>
</tr>
<tr>
<td>Adaptability/Flexibility</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Consistently reacts appropriately without direction</td>
<td>Reacts appropriately with little direction</td>
<td>Does not react appropriately to changing demands and responsibilities, needs specific direction to adjust</td>
<td></td>
</tr>
<tr>
<td>Quality of Work</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Consistently accurate work</td>
<td></td>
<td>Few errors, careful</td>
<td>Many errors, careless, work must be redone</td>
</tr>
<tr>
<td>Interpersonal Skills</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Works exceptionally well with others, initiates conversations in the workplace</td>
<td>Gets along satisfactorily with others</td>
<td>Does not work well with others</td>
<td></td>
</tr>
<tr>
<td>Attitude Toward Feedback</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Seeks and accepts feedback, flexible to change, improves upon feedback</td>
<td>Accepts feedback, flexible, open to and willing to improve</td>
<td>Does not receive feedback well, not flexible, not looking to improve</td>
<td></td>
</tr>
<tr>
<td>Professional Appearance</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Always complies with company dress code</td>
<td>Almost always complies with company dress code</td>
<td>Does not comply with company dress code</td>
<td></td>
</tr>
<tr>
<td>Dependability</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dependable, requires no supervision to carry out job duties confidently</td>
<td>Dependable, requires little supervision to carry out job duties confidently</td>
<td>Not dependable, requires constant supervision to carry out job duties</td>
<td></td>
</tr>
<tr>
<td>Quantity of Work</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Always engaged in the assigned area, uses time effectively</td>
<td>Usually engaged in the assigned area</td>
<td>Frequently unengaged, away from the assigned area</td>
<td></td>
</tr>
<tr>
<td>Initiative/Self Reliant</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Self-reliant, constantly looking for work to complete</td>
<td>Frequently seeks work to complete</td>
<td>Never initiates, must always be told what to do</td>
<td></td>
</tr>
<tr>
<td>Safety</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Safety conscious, exceptionally careful</td>
<td>Careful, accepts safety as part of the job</td>
<td>Dangerously careless, unsafe for self and others</td>
<td></td>
</tr>
</tbody>
</table>

10 = EXCELLENT  
9 = AVERAGE  
8 = UNSATISFACTORY
- Identify major strengths of this student:

- Identify any major challenges in the attitude or performance of this student:

Is improvement needed in any particular skill(s) related to this student’s job? If so, please describe:

________________________________________________________

________________________________________________________

________________________________________________________

________________________________________________________
Credit is based on the number of hours spent at the internship site. For every 30 hours at the internship site, .25 credits are earned up to a maximum of 2 credits.

PERSONAL INFORMATION

Name: ___________________________________________   Homeroom Number: __________
Address (Street, City, State and Zip code): _________________________________________________
Home Telephone No.:_________________   Student’s Cell Phone No.: _________________________

Parent/Guardian #1:
Name: ___________________________   Occupation: _______________________________________
Address: ____________________________________________
Employer Name: _______________________________________
Work Phone No.: _______________________   Cell Phone No.: _____________________________
E-mail: __________________________________________

Parent/Guardian #2:
Name: ________________________________   Occupation: _________________________________
Address: ____________________________________________
Employer Name: _______________________________________
Work Phone No.: _______________________   Cell Phone No.: _____________________________
E-mail: __________________________________________

TYPE OF INTERNSHIP PREFERRED

_____During 1/2 of the school year (1st Semester)  _____During 2nd Semester
_____During the entire school year  _____Summer

If a long-term internship program isn’t available, I am interested in meeting and shadowing a professional in the field in order to learn more about my career interest.

Please check:  _____ Yes  _____No
INTERNSHIP GOAL
Briefly describe your desire and goals for an internship experience:

INTERNSHIP CONTACT INFORMATION
Do you already have a contact for an internship experience? If so, please complete the information below.

Company: __________________________________________

Address: __________________________________________

Name of contact person: __________________________________________

Position of contact person: __________________________________________

Phone number: __________________________________________

TRANSPORTATION
(The school does NOT provide transportation for internship students and students are not permitted to ride with anyone except parents.)

Will you be driving yourself? ______

If not, how will you get to your internship? __________________________________________

APPLICATION PACKET
Include with this application the following:

(2) Two Teacher Recommendations

A copy of your most recent report card

Return the application and attachments to:

Mrs. Consevage, Career Coordinator, Counseling and Career Center
An Internship Review Committee will review your application. You will be notified as to whether or not you have been recommended to proceed further in the internship program. Upon this recommendation to proceed, the CV Career Coordinator will contact the employer and begin executing the internship agreement. Please remember that there may not be intern sites available for certain interests and time frames. It is the right of employers, after interview sessions, to decide which students they will accept as interns.

______________________________  ________________________
Student’s Signature               Date

______________________________  ________________________
Parent/Guardian’s Signature       Date
# INTERNSHIP LOG

**Company/Program:** ____________________________________________  
**Student’s Name:** ____________________________________________

<table>
<thead>
<tr>
<th>Date: ________________</th>
<th>Start Time: ________</th>
<th>Finish Time: ________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date: ________________</td>
<td>Start Time: ________</td>
<td>Finish Time: ________</td>
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<td>Start Time: ________</td>
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<td>Finish Time: ________</td>
</tr>
<tr>
<td>Date: ________________</td>
<td>Start Time: ________</td>
<td>Finish Time: ________</td>
</tr>
</tbody>
</table>

**Supervisor Signature:** ________________________________ **Date:** _____________________