

# Internship Program

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## INTERNSHIP PROGRAM POLICIES AND PROCEDURES NON-PAID/FOR CREDIT AND GRADUATE INTERNS

### Policy

Credit interns must:

- A. Be enrolled at an accredited college with an intern program.
- B. Be a Junior or Senior.
- C. Receive course credit.
- D. Have a letter from the college stating the class and number of units to be earned (*if internship is for class credit*)
- E. Have a letter from the college stating the internship is necessary to fulfill graduation requirements (*if internship is not for class credit*)

Graduate interns must:

- A. Be a graduate from an accredited college.
- B. Work for experience.

All interns must:

- A. Receive no monetary compensation for the hours worked.

### Requirements

- Students must work a minimum of 12 hours, but no more than 32 hours per week.
- Graduates must work a minimum of 16 hours, but no more than 40 hours per week.
- A statement from the advisor verifying credit will be awarded upon successful completion of the program.

### Qualifications

- Students must be able to work in Microsoft Word, PowerPoint, Excel and Outlook.
- Students must have the ability to research via internet.
- Students must have good oral and written communication skills.
- Desktop publishing/graphics experienced is desired, but not required.

### Procedure

Prior to the intern's first day, the student must forward a copy of the following to The Miles Agency's Intern Coordinator:

1. The Student Intern Agreement
2. The Intern Information Sheet
3. The Schedule and Participation Agreement
4. A letter from the college stating the class and number of units to be earned

*(if internship is for class credit)*

5. Have a letter from the college stating the internship is necessary to fulfill graduation requirements *(if internship is not for class credit)*

**Fax** - 757-473-1852

**Mail** – P.O. Box 68228, Va. Beach, VA 23471

Expectations

- Demonstrate professionalism in communication, public relations, personal presentation, punctuality, and attendance
- Demonstrate initiative and willingness to develop new and useful skills, and enthusiasm in the performance of all tasks
- Demonstrate a team player attitude

General Duties

- Research assistance on projects and proposals
- Constructive input/ideas to assist with clients and events
- Administrative support
- Maintaining client relations
- Assist at client events

To Apply:

Submit cover letter, resume, 2 writing samples, and application with course credit verification statement from the advisor.

We will call to confirm an interview upon receipt of all materials. Send materials to:

**Intern Coordinator**

**The Miles Agency**

**P.O. Box 68228**

**Virginia Beach, VA 23471**

**OR**

**Fax: 757-473-1852**

For more information call **757-499-9627/800-743-9627**. Please visit our website at ***www.themilesagency.com***.

# THE MILES AHEAD INTERNSHIP APPLICATION

*Please submit this application with resume and cover letter*

Name: \_\_\_\_\_ SS#: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number: (school) \_\_\_\_\_ (home) \_\_\_\_\_

College: \_\_\_\_\_ Major: \_\_\_\_\_

Desired Placement: \_\_\_\_\_

Indicate Schedule Availability:

Mon: \_\_\_\_\_ Fri: \_\_\_\_\_

Tues: \_\_\_\_\_ Sat: \_\_\_\_\_

Wed: \_\_\_\_\_ Sun: \_\_\_\_\_

Thurs: \_\_\_\_\_ Total Hrs./Week \_\_\_\_\_

Give a brief statement of your ultimate career objective:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Will you receive educational credit for the internship? Yes \_\_\_\_\_ No \_\_\_\_\_

Faculty Advisor \_\_\_\_\_

Recommendation/ \_\_\_\_\_

Credit Verification \_\_\_\_\_

Statement: \_\_\_\_\_

Special Requirements: \_\_\_\_\_

(i.e. faculty visits, \_\_\_\_\_

Student reports, \_\_\_\_\_

Supervisor evaluation) \_\_\_\_\_

Faculty Advisor: \_\_\_\_\_

Address: \_\_\_\_\_

Print name, Sign, and Date:

(Applicant) \_\_\_\_\_

(Faculty Advisor) \_\_\_\_\_

THE MILES AHEAD INTERNSHIP PROGRAM  
INTERN INFORMATION SHEET

PERSONAL INFORMATION

NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

HOME PHONE: \_\_\_\_\_ MOBILE PHONE: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

SCHOOL INFORMATION

SCHOOL ATTENDING: \_\_\_\_\_

ANTICIPATED DATE OF GRADUATION: \_\_\_\_\_

CLASS ATTENDING FOR CREDIT: \_\_\_\_\_

INTERNSHIP INFORMATION

DEPARTMENT: \_\_\_\_\_

SUPERVISOR: \_\_\_\_\_

LOCATION: \_\_\_\_\_

PHONE: \_\_\_\_\_

DATES OF PARTICIPATION START: \_\_\_\_\_ END: \_\_\_\_\_

EMERGENCY CONTACT

NAME: \_\_\_\_\_

RELATIONSHIP: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_

# THE MILES AHEAD INTERNSHIP PROGRAM STUDENT SCHEDULES AND PARTICIPATION AGREEMENT

Please complete this form and return to me no later than \_\_\_\_\_.  
Any student who has not returned this form to me by the deadline will be unable to  
continue in the program.

**Name:** \_\_\_\_\_

**Department:** \_\_\_\_\_

**SCHEDULE: Mon.** \_\_\_\_\_ **Fri.** \_\_\_\_\_

**Tue.** \_\_\_\_\_ **Sat.** \_\_\_\_\_

**Wed.** \_\_\_\_\_ **Sun.** \_\_\_\_\_

**Thur.** \_\_\_\_\_ **Tot. Hrs/Wk** \_\_\_\_\_

**Approved by:** \_\_\_\_\_

(Supervisor prints and sign name)

(Date)

Please read and sign the following:

“I hereby acknowledge and agree that I am participating in a student intern program  
through \_\_\_\_\_ at The Miles Agency for which I will receive

(Name of school)

school credits. I further acknowledge and agree that I will receive no monetary  
compensation for work performed at The Miles Agency.”

NAME (PRINT) \_\_\_\_\_

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

**THE MILES AHEAD INTERNSHIP PROGRAM  
GRADUATE SCHEDULES AND PARTICIPATION  
AGREEMENT**

Please complete this form and return to me no later than \_\_\_\_\_.  
Any student who has not returned this form to me by the deadline will be unable to  
continue in the program.

**Name:** \_\_\_\_\_

**Department:** \_\_\_\_\_

**SCHEDULE: Mon.** \_\_\_\_\_ **Fri.** \_\_\_\_\_

**Tue.** \_\_\_\_\_ **Sat.** \_\_\_\_\_

**Wed.** \_\_\_\_\_ **Sun.** \_\_\_\_\_

**Thur.** \_\_\_\_\_ **Tot. Hrs/Wk** \_\_\_\_\_

**Approved by:** \_\_\_\_\_  
(Supervisor prints and sign name) (Date)

Please read and sign the following:

“I hereby acknowledge and agree that I am participating in a student intern program at  
The Miles Agency for which I will receive work experience. I am a graduate from  
\_\_\_\_\_  
(Name of school)

I further acknowledge and agree that I will receive no monetary compensation for work  
performed at The Miles Agency.”

NAME (PRINT) \_\_\_\_\_

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

## THE MILES AHEAD INTERNSHIP PROGRAM STUDENT INTERN AGREEMENT

I hereby acknowledge that I am being provided an opportunity to perform services in the office(s) of The Miles Agency, designed primarily for my educational benefit, during the period from \_\_\_\_\_ to \_\_\_\_\_.

I understand and agree to the following:

1. I am enrolled as a student at \_\_\_\_\_ (the "College"), which has a student intern program.
2. I am not being monetarily compensated for my intern work at The Miles Agency.
3. I am eligible to earn course credit from the College for participating in The Miles Agency's Internship Program.
4. I have presented, to The Miles Agency, a letter from the College stating the type and number of course credits to be earned.
5. The Miles Agency will have no responsibility or obligation whatsoever in determining whether or not I receive course credits, but rather such determination will be made by the College.
6. The Miles Agency or I may terminate my participation immediately with or without cause at any time upon notice to the other. I also will notify the College of any such termination.
7. I release and discharge The Miles Agency, and each of their directors, officers, employees and agents, of and from all liabilities, claims, demands, actions and causes of action of any kind arising out of or relating to all losses, damages or injuries of any kind sustained or incurred by me during my participation in The Miles Agency's Internship Program.

NAME (PRINT) \_\_\_\_\_

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_



## THE MILES AHEAD INTERNSHIP PROGRAM GRADUATE INTERN AGREEMENT

I hereby acknowledge that I am being provided an opportunity to perform services in the office(s) of The Miles Agency, designed primarily for my educational benefit, during the period from \_\_\_\_\_ to \_\_\_\_\_.

I understand and agree to the following:

1. I am a graduate from \_\_\_\_\_ (the "College"), which has a student intern program.
2. I am not being monetarily compensated for my intern work at The Miles Agency.
3. The Miles Agency will have no responsibility or obligation whatsoever in determining whether or not I receive course credits, but rather such determination will be made by the College.
4. The Miles Agency or I may terminate my participation immediately with or without reason at any time upon notice to the other. I also will notify the College of any such termination.
5. I release and discharge The Miles Agency, and each of their directors, officers, employees and agents, of and from all liabilities, claims, demands, actions and causes of action of any kind arising out of or relating to all losses, damages or injuries of any kind sustained or incurred by me during my participation in The Miles Agency's Internship Program.

NAME (PRINT) \_\_\_\_\_

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_