



## INSTRUCTION DOCUMENT

### BUS 430 – Internship/Cooperative Education

#### Instructions:

1. Complete the BUS 430 Student Contract, Employer Contract, and University Liability Statement (below) with the appropriate information and signatures.  
**Disclaimer: The contract and liability statement must be completely filled out and include all required signatures. Incomplete forms will not be accepted.**
2. Submit the **Internship Application**, attaching your signed Internship Contact and a PDF of your Internship/Job Description.
3. The Internship Application will be submitted to your designated Area Chair for Concentration Elective approval. Check the Internship Application for deadlines.
  - If your Internship Application is **approved**, you will be deemed eligible to enroll in BUS 430 and apply this 4-unit course towards your Concentration Elective Degree Requirement.
  - If your Internship Application is **denied**, you may still be eligible to enroll in BUS 430, but the course will apply towards your Free Electives units rather than a specific degree requirement.
  - NOTE: If you are declared as a Marketing Management Concentration and your Internship Application is denied, you will **not be eligible** to enroll in BUS 430.
4. Upon approval, you will be contacted via your Cal Poly email with course enrollment instructions, including a permission number that will allow you to enroll. Students are responsible for adding the course before the add/drop deadline to guarantee enrollment.



**STUDENT CONTRACT**

BUS 430 (Internship/Cooperative Education)

Current Quarter \_\_\_\_\_ Year \_\_\_\_\_

Date: \_\_\_\_\_

**INFORMATION:**

- In order to meet course requirements and receive credit for BUS 430:
  - This contract must be completed and submitted before the deadline
  - The student must self-enroll in BUS 430-01 using class # provided by Orfalea Student Services
  - The student must submit one Progress Report and a Final Report via Canvas by established due dates

**I. STUDENT**

The student is agreeing to...

1. Work, in consideration of the mutual promises contained herein, for and in the services of the employer under the terms and conditions herein agreed upon.
2. Submit one Progress Report and a Final Report by established due dates.

The student's signature certifies that all provided information above is correct. Additionally, it implies that the student has read, understands, and will adhere to all the requirements indicated on the BUS 430 Contract.

**Student Signature:** \_\_\_\_\_ Date: \_\_\_\_\_



**EMPLOYER CONTRACT**

BUS 430 (Internship/Cooperative Education)

Current Quarter \_\_\_\_\_ Year \_\_\_\_\_

**II. EMPLOYER**

The employer is agreeing to...

1. Verify the student's employment
2. Submit final employer report verifying hours worked and evaluating student performance

Company Name: \_\_\_\_\_

Supervisor Name/Title: \_\_\_\_\_

Supervisor E-mail: \_\_\_\_\_

The employee will be employed from \_\_\_/\_\_\_/\_\_\_ until \_\_\_/\_\_\_/\_\_\_.

The employee will work for \_\_\_\_\_ hours/week for \_\_\_\_\_ weeks.

Students' Job title: \_\_\_\_\_

The employer's signature certifies that all information above is correct. Additionally, it implies that the employer has read, understands, and will adhere to all the requirements indicated on the BUS 430 Contract.

**Employer Signature:** \_\_\_\_\_ Date: \_\_\_\_\_



### LIABILITY STATEMENT

BUS 430 (Internship/Cooperative Education)

Current Quarter \_\_\_\_\_ Year \_\_\_\_\_

Qualified Cal Poly students may earn university credit while working as an Intern for a cooperating institution if the requirements of the Internship/Co-op are successfully completed. Because the day-to-day requirements and obligations of the Intern/Co-op are conducted under the sole jurisdiction of a designated officer in the cooperating institution, the University does not, nor can it, assume any liability for the safety and/or health care of the Intern/Co-op.

In accepting an Internship/Co-op, the student acknowledges the full release of any liability on the part of the University for physical or other accidents. The Internship/Co-op agrees to assume full responsibility for reviewing with the cooperating institution any employee benefits that may be available (i.e., health and accident insurance, liability insurance, workers' compensation, etc.). In the event the cooperating institution does not provide desired benefits, it will be the responsibility of the student to make his or her own arrangements, if desired.

In signing this statement, the student acknowledges full understanding of the liability statement, and consents to the same.

**Student Signature:** \_\_\_\_\_ Date: \_\_\_\_\_

**FINAL STEP: Submit the BUS 430 STUDENT CONTRACT, EMPLOYER CONTRACT, and LIABILITY STATEMENT along with the online Internship Application. If you have any questions, please contact Orfalea Student Services.**