



Placentia-Yorba Linda Unified School District Internship Application Form



(To be completed by the Val Tech student and his/her potential host and then submitted to the Val Tech Coordinator prior to beginning the Internship Program)

Student: _____ **Class of** _____

Organization: _____ **Website:** _____

Intern's Contact: _____ **Phone:** _____

Supervisor: _____ **Phone:** _____

Signature: _____ **Address:** _____

Email address: _____
(City State Zip)

Proposed dates of the Internship: _____

Summarize the goal of the organization:

Describe the activities and tasks involving technology that you want the Val Tech intern to complete:

How many hours per week do you expect the intern to be at your place of operation?

How many hours per day do you expect the intern to be at your place of operation?

How long do you expect the intern to be at your place of operation? (150 hours or fewer than 150 hours? If fewer than 150 hours, how many hours?)

We—the parent, the organization, Valencia High School, the PYLUSD, and Val Tech Student—understand that any party may terminate this internship at any time for any reason or for no reason, with or without cause, and with or without notice.

Parent Signature

Potential Internship Host Signature

Student Signature

Valencia Academy Director

Please attach a business card to the top of this form.

