



C.O.R.E. INTERNSHIP PROGRAM

Creating Opportunities through Real Experiences

STUDENT COMMITMENT FORM

You are applying to participate in the Jobs for Delaware Graduates **C.O.R.E. Internship Program**. If you are accepted into the program, we expect you to fully participate in all program activities and to be personally responsible for your attendance, attitude, and performance at work and at other activities.

As a student intern, I agree to:

- Arrive to work on time, dressed appropriately.
- Ask questions if I do not understand how to do something.
- Complete assigned work tasks.
- Contribute to a positive atmosphere at the workplace.
- Comply with all internship and/or company policies and regulations.
- Discuss and set realistic goals with my supervisor and participate in periodic assessments.
- Notify the supervisor, in advance, if I will be late or absent for any reason.

Please sign below to indicate your acceptance of the terms listed above:

Student's Name (Please Print): _____

Student Signature: _____ Date: _____

PARENT/GUARDIAN ACKNOWLEDGMENT

Your student is applying to participate in the C.O.R.E. Internship Program, a program that will provide him or her with the chance to explore a career and learn job skills while being supported by your School District, JDG, and Christiana Care staff. During this time, students will be exposed to a variety of hospital activities. To ensure their safety, students are required to strictly comply with Christiana Care policies and procedures. If your student is accepted to participate, we will ask that he or she follow all the standards expected of a responsible worker.

Please initial below to indicate your acceptance of the following:

_____ Consent for Jobs for Delaware Graduates, Inc. to place your child in an internship ([see Delaware Chapter 5 Labor Laws](#)), with the understanding that any intern maybe reassigned or terminated based on work performance, attendance, interest, or other factors.

_____ I understand that my child will be exposed to food service and/or other hospital activities and procedures and is required to strictly comply with Christiana Care policies and procedure.

_____ Consent to take pictures/video of your child at worksites, trainings, and events for documentation of program activities. These pictures may be used in brochures, newsletters, blog, website and/or other program materials.

_____ By accepting a position with C.O.R.E. Internship Program, interns are committing to maintaining a regular work schedule and prioritizing attendance at work and school.

I hereby consent to my child's attendance and participation in the C.O.R.E. Internship Program with Christiana Care. I also hereby release Christiana Care and its agents and employees from all claims, demands, and liabilities whatsoever in connection with the above.

Parent's Name (Please Print): _____

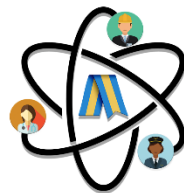
Parent's Signature: _____ Date: _____

Emergency Contact Name: _____

Emergency Contact Number: _____

Thank you for applying for the 2018 C.O.R.E. Internship Program.
Please retain a copy of the application for your records.

For questions about the C.O.R.E. internship Program,
please email: internships@jdginc.org



The C.O.R.E. Internship Program is made possible through a collaboration with
Christiana Care Health System and Jobs for Delaware Graduates, Inc.

