

INROADS Student Commitment Agreement 2016

*I recognize INROADS as the primary facilitator in* ***all activity*** *between my sponsoring company and myself.*

**As an INROADS Intern, I agree to the following to:**

\_\_\_\_**Internship Performance** *(Professional Internship)*

1. Remain professional and represent INROADS at all times.
2. Work at least 10 weeks unless sponsor states different timeline.
3. Not allow summer classes and/or personal matters to conflict with regular business hours or INROADS requirements.
4. Receive a work performance rating of “Meets Expectations” or better each summer.
5. Keep salary information confidential and not discuss the salaries of others.
6. Meet, as scheduled, with the Business Advisor and/or Business Coordinator.
7. Upon graduation, give first consideration for employment to my sponsoring company, if a reasonable offer is extended.
8. Notify my **INROADS advisor FIRST** of any intended changes in my work schedule.

\_\_\_**Coaching/Advising Sessions** *(Year Round Coaching & Advising)*

1. Schedule and keep monthly Coaching & Advisement sessions with my INROADS advisor each Month.
2. Respond to phone calls, emails from INROADS in a timely manner.

\_\_\_**Academic Excellence** *(Year Round Coaching & Advising)*

1. Remain in good academic and full-time standing in a four-year college/university, maintaining the 3.0 cumulative GPA required by INROADS and my sponsoring company.
2. Submit Fall Grades by January 15 and Spring/Winter grades by June 15.
3. Schedule academic tutoring when suggested by my INROADS advisor. *INROADS support for payment must be approved and authorized by my INROADS Manager.*
4. Notify my INROADS advisor prior to sharing with my sponsoring company any intended changes in my academic schedule OR change in major.

\_\_\_\_**Professional/Leadership Development** *(Developmental Workshops and E-Learning)*

1. Attend and participate in **all** required training and development activities.
2. Complete required prework assignments, that will prepare me for Summer 2016 learning activities.
3. Complete required e-learning courses as directed by the scheduled deadline.
4. Cover expenses that might be incurred outside of the scheduled training.
5. Conduct myself at all development events in a professional manner.
6. Abide by rules and regulations regarding zero tolerance for alcohol and other restricted behaviors at INROADS events.
7. Provide appropriate Health and Liability forms to INROADS (when requested).

\_\_\_\_**Community Service/Student Involvement** *(Community Service)*

1. Participate in all required community service activities.
2. Participate in the planning and execution of National Day of Service—July 2016.
3. Complete 24 hours community service (outside of the National Day of Service) between June 1 and May 31st. (refer to the Community Service Policy)
4. Pay the annual $100 activity fee by June 30th . After June 30th, fee with be $120.

\_\_\_\_**Complete File** *(Year Round Coaching & Advising)*

1. Submit my degree plan/audit and discuss with my INROADS advisor.
2. Provide INROADS with an updated resume at the end of each summer internship and/or upon request.
3. Submit my class schedule each semester/quarter.
4. Ensure INROADS receives my Mid-Summer & End-of-Summer evaluation.
5. Develop career and personal goals in partnership with my INROADS advisor.

***I understand that failure to fulfill any of the responsibilities outlined above will be sufficient reason for my participation in INROADS to be terminated. The final decision for separation from INROADS is the decision of my Manager, Regional Director and potentially the Chief Operating Officer. My overall commitment including work performance and fulfillment of INROADS obligations will be considered. If I am terminated or resign from INROADS, I will also relinquish employment with my corporate sponsor.***

INTERN SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PRINT:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Staff Initials (confirming receipt): \_\_\_\_\_\_\_\_\_\_\_\_**