

Employer Internship Application

This form form is for employers to apply for the CareerEdge Funders Work Experience and Internship Reimbursement Funding Program

EMPLOYER INFORMATION

Company Name * Industry * Address * Street Address Address Line 2 State / Province / Region City ▼ Country ZIP / Postal Code Name * First Last Email * Phone * Name of Intern Supervisor *

INTERNSHIP INFORMATION

Student Name *

Job Title and Department *

Intern Email *

Intern Phone *

Intern Duties *

Start Date *

Total work hours/week *

Length of internship *

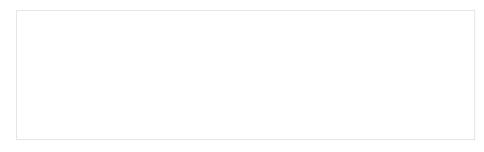
Total hours applying for *

Current hourly pay rate *

Do you currently have full time positions open? *

If so, would you hire the intern if he/she is a good fit? *

Additional Comments *



EMPLOYER CONSENT

Not only is this program designed to prepare our youth for tomorrow's workforce, help them earn wages while gaining real-world experience, and help bridge the gap between our local talent pool and local employers, but it is also designed to track the internship experience here in the Sarasota-Manatee region. By gathering information from local employers, tracking internship experiences, and creating the ability to further communicate with students at they enter the workforce, we will be able to develop trends and better understand growing industries in this region and youth interest in working here.

As an employer receiving these funds you will be required to track your interns progress throughout the program. Weekly tracking may be utilized in-house, but CareerEdge will require an initial review to weigh the intern's current skills and needs along with a final review after the program is complete. These documents will need to be signed by both the intern as well as the mentor/supervisor. CareerEdge will provide the necessary documents to ensure standardized tracking from employer to employer. Employer is also required to submit proof of wages in order to receive funding.

By signing below you agree to abide by these terms in order to receive funding.

Agreement *

I agree to the terms and conditions

Digital Signature *

Date *

Please send completed forms to:

Deborah Chapman, CareerEdge Program Director United Way Suncoast 1800 2nd Street, Ste. 102 Sarasota, FL 34236 Fax: 941-365-4368 / Email: dchapman@uwsuncoast.org