

Senior Internship Program
Parent Permission

This form must be completed by the student and parent. Then, it will be uploaded with the Internship Application on the Google Form.

Student Information:

First and Last Name: _____

Semester of Internship: _____ Periods of the Day: _____

Internship Location: _____

Supervisor for Internship: _____

Parent Permission:

I give permission for my child, _____, to participate in the Internship program. I understand that:

- All Solanco Expectations remain in place at the Internship.
- Students are grade on Pass/Fail. To pass, they must satisfactorily: attend the internship daily, turn in an evaluation at the end of each quarter, complete a daily journal, and keep consistent communication with the Internship Coordinator.
- Students must continue to earn credits they need for graduation.
- No transportation is provided.
- Students may not miss courses in the building for additional time.
- Clearances must be submitted from supervisors who are not Solanco Employees.
- The district is not liable for accidents or medical concerns while the student is off-campus.

Name: _____

Signature: _____ Date: _____