

Agreement No.: Zi-Di:



Internship Agreement

This Agreement is made between

Party A: _____ &

Party B: Wenzao Ursuline University of Languages

Party C:

Duration: from mm dd yyyy to mm dd yyyy

Date of agreement: mm dd yyyy

The contract is signed between OOOOOOOO (hereinafter “Party A”) and Wenzao Ursuline University of Languages (hereinafter “Party B”). The aim of this Agreement is to promote the internship program so that both parties can comply with the collaborative rules.

A. Responsibility

- (1) Party A is charge of internship program design, job distribution, enrollment, training and guidance.
- (2) Party B is responsible for internship arrangement and counseling matters.

B. Duration

Type: with credit without credit

Category: in summer during semester during academic year

other: _____

Duration: from mm dd yyyy to mm dd yyyy

Month(s)/week(s): 0 month(s)/ 0 week(s)

Hours: 000 hours (the total hours are recorded in the Internship Certificate)

C. Data of student

Educational system	Grade	Grade (for interns in cross-academic year)			
		Class	Student ID No.	Name	Remarks

D. Contents

1. Job items and description: _____

(or it can also be described in the “Internship Requirement List” which has to be enclosed with this Agreement).

2. Job items are arranged based on students' health and safety.

E. Report in

1. Party B should send the list of interns and their data to Party A one week prior to the start of the internship. Due to demands, the duration can be extended after the agreement has been signed by both parties.
2. On-the-job training should be carried out after reporting in; interns will be guided by professionals; the hours of this orientation will be counted as being within the duration.

E. Payroll:

F. Meals & accommodation:

G. Transportation:

H. Insurance (note: if NO insurance is provided by Party A, please mark that

Insurance is borne by Party B during the period of the Internship)

I. Counseling

1. Each intern is guided by the professionals of Party A who are in charge of his/her job contents and skills
2. A counselor of Party B will be arranged due to the requirement, who is responsible for matters of counseling, communication and contact.
3. No illegal behavior should be conducted in the job contents of the internship; if Party A violates the law, Party B has the right to terminate this Agreement and the relationship between the interns and Party A will be terminated accordingly.

J. Evaluation

1. The performance scores should be evaluated by the manager of Party A and the counselor of Party B, respectively. Party A should send the Performance Scores Evaluation and Internship Certificate both issued by Party B back to Party B within one week after the termination of the internship.
2. The presence/absence is evaluated by Party A. If there are unexpected performance or difficulties of adaption, Party A should inform Party B and solve the problem together. After counseling, if the expected result cannot be achieved, the internship will be cancelled or the student will be transferred to another unit.
3. Irregular reviews will be implemented during the period of the internship in order to accomplish successful results

K. Supplementary

1. Party B should ask the interns to sign Agreement of Intellectual Property Rights and Confidentiality with Party A for the related business. The business secret known or held by the interns or Party B should not be disclosed to any third party or used by the interns or Party B either during the period or after the termination of the Internship. The secret shall not be disclosed, reported or published at all.
 2. The Appendixes hereof shall be made a part of the Agreement and possess the same effect. Other matters not stated in this Agreement shall be addressed according to further agreement made by both parties.
 3. This Agreement shall be construed and governed according to the laws of the Republic of China.
 4. Any dispute arising with respect to this Agreement shall be determined by arbitration taking place in Kaohsiung District Court, the first jurisdiction, as both parties may agree upon.
- L. This Agreement is made in duplicate; a copy should be kept by each party.
- M. Appendixes
- (I.) Internship Certificate issued by Wenzao Ursuline University of Languages
 - (II.) Performance Scores Evaluation issued by Wenzao Ursuline University of Languages

Agreement signed by

Party A:

Representative:

Add.:

Business Registration No.:

Party B: Wenzao Ursuline University of Languages

Representative: President

Add.: No. 900, Minzu 1st Rd., 80793 Sanmin District, Kaohsiung

Business Registration No.: 76000424

Party C:

Date of agreement: mm dd yyyy

Wenzao Ursuline University of Languages

Internship Evaluation Form

1. This evaluation form is to be completed by the supervisor after the intern's completion of internship. Please send the completed form to the personnel of the unit of Wenzao that you cooperate with (that is, the unit that you sign the contract with) after students finish their internship.
2. Upon completing the internship, the intern student should hand in the Internship Report to the supervisor within one week.

	Intern's Name : _____	Student No. : _____
	Dept. and Class : _____	
	Name of Institution : _____	
	Internship Period : from ___/yr ___/mo ___/day to ___/yr ___/mo ___/day	

The highest score of each item is 6, the maximum scores in total are 60.

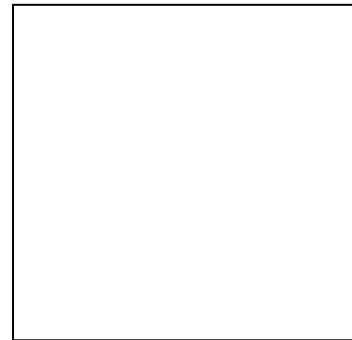
項目	Items	Scores	Remarks		
一	Demonstrate ability to learn new skills (6%)				
二	Self-motivated and willing to take on tasks (6%)				
三	Ability to plan and accomplish tasks effectively (6%)				
四	Exhibit professional ability and attitude (6%)				
五	Interpersonal Skills and work cooperatively with others (6%)				
六	Demonstrate reliability and work ethics (6%)				
七	Ability to create and communicate possible solutions to problems (6%)				
八	Ability to accommodate changes and cope in stressful situations (6%)				
九	Report to work as scheduled and on-time (6%)				
十	Appropriate behaviors and Appearance (6%)				
Total Scores					
Overall Assessment and suggestion for the intern's improvement					
Leave-taking Records (Please ensure to fill out this part)	Leave Types	Personal leave	Sick leave	Absence w/o official leave	Others
	Days(hours)				
Signature	HR Supervisor:		Intern's Supervisor		

Wenzao Ursuline University of Languages

Certificate of Internship

This is to certify that _____ (student's name) of
Department of _____, has successfully completed
Internship Program from _____ to _____,
totally _____ hours.

Host Institution :



Supervisor:

Date: