Agreement No.: Zi-Di:



Internship Agreement

This Agreement is made between

Party A (host institution):

&

Party B: Wenzao Ursuline University of Languages

Party C (the intern):

Duration: from mm dd yyyy to mm dd yyyy

Date of agreement: mm dd yyyy

The contract is signed among			((hereinafter "Party A"), Wenzao		
Ursuline Univ	ersity of Lan	guages (here	einafter "Party	B"), and		
(hereinafter "	Party C").	Γhe aim of tl	his Agreement	is to promote	e the internship	
program so th	nat both par	ties can com	ply with the co	ollaborative r	ules.	
A. Responsib	oility					
	_			job distributi	on, enrollment, and	
•	0	and guidance	•	. 1	1. D . C	
(2) Party B 18	responsible	e for internsl	hip arrangemer	nt and counse	eling Party C.	
B. Duration						
Type: □ wit	th credit 🗆	without cred	lit			
Category: □ o	during sumr	ner 🗆 during	g semester □ d	uring academ	nic year □	
other:						
Duration: from	n mm dd	yyyy to m	m dd yyyy			
Month(s)/wee	ek(s): 0 moi	nth(s)/0 wee	ek(s)			
Hours: 000 h	nours (the to	otal hours are	e recorded in th	ne Internship	Certificate)	
C. Data of st	tudent (Par	ty C)				
		Grade (for interns in cross-academic year)				
Educational system	Grade	Class	Student ID	Name	Remarks	
			No.			
		1				
D. Contents						
1. Job items a	and descript	ion:				
2. Job items a	are arranged	l based on st	udents' 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.
- F. Payroll (allowances):
- G. Meals & accommodation:
- H. Transportation:
- I. Insurance (note: In the event that Party A provides a regular salary or allowances to Party C during his/her internship, Party A shall have Party C enroll in labor insurance [including occupational accident or hazard insurance]. Party B shall not have to purchase accident insurance and medical insurance for Party C. Please specify the following in this field: "Party A has Party C enroll in labor insurance [including occupational accident or hazard insurance] during his/her internship based on the insurance level of his/her salary or allowances. If Party A fails to provide a regular salary or allowances to Party C during his/her internship, Party B shall purchase accident insurance and medical insurance for Party C. In this case, please specify the following in this field: "Party B purchases student accident insurance of NT\$2 million and medical insurance of NT\$50,000 for Party C during his/her internship.")

J. 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 to visit Party C depending on actual needs, who is responsible for matters of counseling, communication and contact.
- 3. Party A shall not engage Party C in illegal behavior during his/her internship; if Party A violates the law, Party B has the right to terminate this Agreement and the relationship between Party C and Party A will be terminated accordingly.

K. 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 Party C has poor performance

- or difficulties adapting to his/her job, Party A should inform Party B and solve the problem together. After counseling, if the expected result cannot be achieved, Party C's internship will be cancelled or he/she will be transferred to another unit.
- 3. Irregular reviews will be implemented during the period of the internship in order to accomplish successful results

L. Supplementary

- 1. Party B should ask Party C to sign Agreement of Intellectual Property Rights and Confidentiality with Party A for the related business. The business secret known or held by Party C or Party B should not be disclosed to any third party or used by Party C 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 Party A, Party B, and Party C.
- 3. Party A shall fulfill its duty to protect Party C's personal data. The use of said data shall fall within the scope of the Personal Data Protection Act.
- 4. To implement the spirit of gender equity and protect interns' rights and interests, Party A shall fulfill its duty to protect Party C, establish relevant regulations, and provide an appeal channel and handling mechanism according to the Act of Gender Equality in Employment. When Party C encounters violations of gender equality laws and regulations, Party A shall provide assistance and methods to handle such violations. Party A shall also notify Party B within 24 hours.
- 5. This Agreement shall be construed and governed according to the laws of the Republic of China.
- 6. Any dispute arising with respect to this Agreement shall be determined by arbitration taking place in Kaohsiung District Court, the first jurisdiction, as three parties (Party A, Party B and Party C) may agree upon.
- 7. Party C has agreed to the terms and conditions of this Agreement and informed his/her parents. If Party C is under 20 years of age, his/her legal representative shall sign in the field "Legal Representative" of this Agreement.
- M. This Agreement is made in triplicate; a copy should be kept by each party.

N. Appendixes

- (I.) Internship Certificate issued by Wenzao Ursuline University of Languages
- (II.) Performance Scores Evaluation issued by Wenzao Ursuline University of Languages
- (III) Internship Insurance Agreement

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:

Legal Representative (Signature of a legal representative is required if Party C is under 20 years of age.):

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.

Upon completing the internship, the intern student should hand in the Internship Report 2. 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 Remarks Scores Demonstrate ability to learn new skills (6%) Self-motivated and willing to take on tasks (6%) Ability to plan and accomplish tasks 三 effectively (6%) Exhibit professional ability and attitude (6%) 四 Interpersonal Skills and work cooperatively 五 with others (6%) Demonstrate reliability and work ethics (6%) 六 Ability to create and communicate possible 七 solutions to problems (6%) Ability to accommodate changes and cope in stressful situations (6%) Report to work as scheduled and on-time (6%) 九 十 Appropriate behaviors and Appearance (6%) Total Scores Overall Assessment and suggestion for the intern's improvement Leave-taking Records Leave Absence w/o Personal leave Sick leave Others official leave (Please ensure to fill Types out this part) Days(hours) HR Supervisor: Intern's Supervisor

Signature

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:

Internship Insurance Agreement

I, a student of the	Department/Graduate Institute in				
the year of study at Wenzac	Ursuline University of				
Languages with Student ID	, hereby certify that I will				
take part in an overseas internsh	nip (Program of the				
year of). I fully understand the content of insurance					
stated in this Internship Agreement. Due to my personal needs, I					
have purchased other insurance with a higher insured amount to					
protect my own rights and interests. I hereby submit the					
insurance certificate to the University to be kept for reference.					
То					
Wenzao Ursuline University of Languages					
Head of Department/Princip Signed by: Postal Address: Phone:	oal Investigator: (Signature) (Signature)				
Parent or Legal Representat	ive: (Signature)				