

**Internship / Work Experience Employer Acknowledgement and Acceptance of County
COVID-19 Health & Safety Protocols**

The health and safety of our students and our community is a top concern. This agreement serves to document that

(business name) (herein referred to as "The Business")

pledges to abide by all local county health and safety rules, regulations, and requirements regarding Covid-19, as relating to workplace operations and procedures. This agreement serves to refer to the physical location of The Business, as well as all other associated locations of The Business.

The Business should refer to their respective state, county, and local jurisdiction public health orders for any specific employer requirements. The Business understands that it is responsible for staying up to date with all health and safety information for the county which it operates.

Additionally, The Business understands and consents to submit and comply with any testing, health monitoring and contact tracing protocols as needed.

Please select:

Student work will be done entirely remotely.

Student work consists of full or partial in-person activity.

Student Name:

Employer Representative:

Title/Role:

Business Name:

Business Address:

County of Business Location:

Employer Rep. Signature:

Date:

Student Signature:

Date:

Dept. Chair / Career Outreach Coordinator: