

Internship Site Self-Assessment and Student Acknowledgement of Risks

This form is to be completed as soon as possible once the student has selected an internship assignment. This form is to be completed by the Internship Site Representative and signed by both the Intern and the Internship site representative. The University department's Internship Coordinator will review, sign and maintain this document in the student's file.

Internship Site: _____ Telephone No: _____
 Address: _____ Email Address: _____
 Site Representative Name: _____ Title: _____
 Site Representative Signature: _____ Date: _____

The following check box items are an indication of the safety and security at the Internship Site. N/A means "Not Applicable". If any item is checked NO, please explain on a separate page.

- | | | | |
|---|------------------------------|-----------------------------|------------------------------|
| Is the site environment considered an "office exposure" only site? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| Are emergency plans current? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| Are hazardous materials or hazardous chemical controlled? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| Are all manufacturing tools and equipment guarded? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| Are interns provided with safety training prior to starting work? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| Will intern wear personal protective equipment, if necessary? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| Are working conditions and general environment safe? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| Is there adequate employee parking on site? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| Are parking areas well lit as necessary? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| Is site accessible by public transportation? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| Will interns be restricted from interacting with potentially violent clients? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| Is management and supervisory oversight adequate? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| Is the site located in a crime-free area? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| Interns will not be required to drive as part of their responsibilities? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| Interns will not be required to perform heavy manual labor? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| Is the above site location the only place the intern will work? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |

I have evaluated and understand potential health and safety risks associated with this Internship Site. I have undertaken additional research and/or visited the site in response to any **no** answers from the Internship Site. I am able to articulate those risks to student who may choose to intern at this site.

Internship Coordinator Name: _____
 Internship Coordinator Signature: _____ Date: _____

I have read and understand the potential health and safety risks associated with this Internship Site. I have discussed these risks with the department's Internship Coordinator and accept this internship as presented.

Student Name: _____
 Student Signature: _____ Date: _____