

EDUCATIONAL INTERNSHIP PROGRAM APPLICATION





NORTH CAROLINA A&T STATE UNIVERSITY POLICE DEPARTMENT Educational Internship Program



The Educational Internship Program was implemented by the North Carolina A&T State University Police Department to meet academic requirements for North Carolina A&T State University students whose degree programs stipulate a period of internship as a condition of Graduation. The program provides North Carolina A&T State University students an opportunity to enhance their formal education through observance and controlled participation in the daily operations of a police organization. The student will experience first-hand the role of a police officer and are also introduced to all the facets of the police department.

Who May Apply:

The Educational Internship Program is reserved for all North Carolina A&T State University students who desire to experience the internship process.

Selection Criteria:

To be selected as an Educational Intern of the North Carolina A&T State University Police Department, a student must:

1. Be meeting the academic standards of North Carolina A&T State University.
2. Be sponsored and endorsed by a member of the North Carolina A&T State University faculty who agrees to act as the student's advisor during the internship period.
3. Agree to all conditions and terms which may be specified by either North Carolina A&T State University or the North Carolina A&T State University Police Department in association with the internship.
4. Be of good moral character as determined by a thorough background investigation.
5. Not have committed or been convicted of a felony or crime for which the punishment could have been imprisonment for more than two years; or have on his or her record a series of convictions of a lesser nature, taken as a whole, indicates a continuing disregard or disrespect of laws and regulations.
6. Complete the application, internship agreement and release of information form.



**NORTH CAROLINA A&T STATE
UNIVERSITY
POLICE DEPARTMENT
Educational Internship Agreement**



I, _____, a student at North Carolina A&T State University, do hereby agree to participate in an educational internship with the North Carolina A&T State University Police Department for which I may receive academic credit and/of other educational benefits from my academic program.

In consideration of the learning experience provided by the North Carolina A&T State University Police Department, I further agree to the following terms of the internship:

1. My internship and association with the North Carolina A&T State University Police Department is of a voluntary nature and that I shall not be considered an employee of the North Carolina A&T State University Police Department or North Carolina A&T State University.
2. I shall have no right to such typical employee benefits from the North Carolina A&T State University Police Department or North Carolina A&T State University as wages, retirement pay, sick leave, paid vacation, workmen's compensation, or any other benefits or compensation generally associated with employee/employee relationship.
3. I waive for myself, my heirs, administrators or assigns, any and all claims, actions, and causes of action against North Carolina A&T State University, its officers, agents, and employees, of injury or damage to my person or property while I am participating in this program.
4. I will hold harmless North Carolina A&T State University, its officers, agents, and employees for any injury, including but not limited to claims for wrongful death, arising in any manner to me while participating in this program.
5. I will hold in strictest confidence all information that I hear or see during this internship. I will not discuss or otherwise release information or records concerning the official business of the North Carolina A&T State University Police Department to anyone outside of the department unless directed to do so by an appropriate official or supervising employee. I will never use the resources of the North Carolina A&T State University Police Department for personal use.
6. I will abide by all regulations, dress codes, etc, that are explained to me by my supervisor in the department.
7. I fully understand that any failure to comply with these terms or any University policies is grounds for my internship to be terminated and a referral to the Dean of Students.

Signature of Student

Date

Signature of Student's Advisor

Date

Signature of Police Department Representative

Date



NORTH CAROLINA A&T STATE UNIVERSITY POLICE DEPARTMENT Internship Application



LAST NAME	FIRST NAME	MIDDLE NAME
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DOB	LAST 4 DIGITS OF SSN
DRIVER'S LICENSE #, STATE	E-MAIL

LOCAL ADDRESS	PERMANENT ADDRESS
STREET	STREET
CITY, STATE, ZIP	CITY, STATE, ZIP
PHONE #	PHONE #

DEPT HEAD	PHONE #	E-MAIL
INTERNSHIP ADVISOR	PHONE #	E-MAIL

EMERGENCY CONTACT		
NAME	RELATIONSHIP	PHONE #

DO YOU HAVE A RECORD WITH THE NC A&T STATE UNIVERSITY STUDENT AFFAIRS OFFICE OR THE UNIVERSITY POLICE? <input type="checkbox"/> YES <input type="checkbox"/> NO IF "YES", EXPLAIN IN DETAIL ON THE BACK OF THIS APPLICATION.
HAVE YOU EVER BEEN CHARGED WITH A CRIME? <input type="checkbox"/> YES <input type="checkbox"/> NO IF "YES", EXPLAIN IN DETAIL ON THE BACK OF THIS APPLICATION.
HAVE YOU EVER BEEN CONVICTED OF A CRIME? <input type="checkbox"/> YES <input type="checkbox"/> NO IF "YES", EXPLAIN IN DETAIL ON THE BACK OF THIS APPLICATION.
HAVE YOU EVER EXPERIMENTED OR USED ILLEGAL DRUGS? <input type="checkbox"/> YES <input type="checkbox"/> NO IF "YES", EXPLAIN IN DETAIL ON THE BACK OF THIS APPLICATION.

INTERNSHIP APPLYING FOR:	SPRING <input type="checkbox"/>	FALL <input type="checkbox"/>
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HOURS TO BE COMPLETED:	
PROPOSED START DATE:	PROPOSED END DATE:

DESIRED SCHEDULE				
<u>MONDAY</u>	<u>TUESDAY</u>	<u>WEDNESDAY</u>	<u>THURSDAY</u>	<u>FRIDAY</u>

I hereby certify that all statements made in this application are true, complete and correct to the best of my knowledge and belief, and that any false statements or major omissions shall be considered sufficient cause for internship disqualification.

APPLICANT SIGNATURE	DATE
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**NORTH CAROLINA A&T STATE
UNIVERSITY
POLICE DEPARTMENT**



**Authorization for Release of Personal
Information**

TO WHOM IT MAY CONCERN:

In order to determine my suitability for internship, I understand that the North Carolina A&T State University Police Department must make a thorough investigation of my personal records and personal background.

Therefore, I, _____, do hereby request and authorize any banks, credit bureaus, credit unions, former and present employers, educational institutions, doctors, insurance companies, government agencies, military organizations, and any other individual or agency to produce copies of any and all information to the North Carolina A&T State University Police Department regarding me whether of a privileged or confidential nature.

Moreover, I release the North Carolina A&T State University Police Department from any civil or criminal liability whatsoever for seeking such requested information and for evaluating such information as it relates to my internship with the North Carolina A&T State University Police Department. And, I release those agencies and individuals from any civil or criminal liability whatsoever for releasing the requested information.

I have read and fully understand the above statements.

Signature: _____

Date: _____

State of North Carolina
County of Guilford

Sworn to and subscribed before me this ____ day of _____, 20__.

(SEAL)

Notary Public

My Commission Expires:
