



Iacocca International Internship Program

Addendum to Student Understanding and Agreement

Student Name: _____

Country of Internship: _____

Internship Start Date: _____ End Date: _____

The student intern, intending to be legally bound, agrees as follows:

1. I agree to enroll as a Lehigh University student for the Iacocca International Internship Program. I recognize that the air travel arrangements will be made through Travel Time for direct travel to/from my internship destination for the program dates as established. Any additional travel beyond the destination and dates as established are my responsibility will be booked by and billed to me separately.
2. I agree to complete the Internship and all required pre-training and subsequent reporting required by Lehigh University and/or the Experience Provider within the specified dates.
3. I agree to accept no other employment or to enroll in any academic coursework during the Internship.
4. I agree to my continued enrollment at Lehigh University throughout the duration of the internship and upon return, unless I am a graduating senior and have deferred graduation until my return from the internship. If, for any reason other than graduation, I do not return to Lehigh University for the fall semester following the internship, I agree to reimburse the University for all costs associated with the internship.
5. I agree to train, work conscientiously, and complete all assignments under the direction of the assigned Internship Administrator and Internship Mentor, submitting all reports and assignments as required by each party.
6. I verify that I and my Internship Administrator have been provided by the Experience Provider a written explanation concerning any dangerous conditions or physical hazards that I may be exposed to as a result of my participation in the Internship program. I understand that the University does not supervise, monitor, or control the Internship working conditions.
7. I understand that reasonable expenses associated with airfare, housing, and an allowance for in-country transportation and most meals, will be paid by the Iacocca International Internship Program. I agree to follow the procedures to receive this mostly-funded opportunity and understand that there may be some expenses incurred on my behalf that will not be covered. If documentation of expenses is needed, I will provide necessary receipts and accounting of all expenses.



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8. I agree to read a copy of the International Internship Agreement between Lehigh University and the Experience Provider. I acknowledge that it is incorporated by reference into this Agreement and that I am bound by the terms and conditions that specifically apply to interns.

I am at least eighteen years of age and am participating in this International Internship voluntarily. I have carefully read this agreement before signing it. No representations, statements, or inducements, oral or written, apart from the foregoing written statement, have been made to me.

Student's signature: _____

Date: _____

University Internship
Administrator's Signature: _____

Date: _____