

Fiche de liaison / New internship agreement

Anticipate a minimum time period between the collection of data on the ENT (university internet platform) and the signature of the internship agreement between the parties involved: count 20 days for an internship in France and 1 month for an internship abroad. CAUTION: for these time periods, take into account the administrative shutdown periods and university breaks.

Identification of the student
Student number :
Surname : Name :
Nationality :
Study level:
Department of study:
Permanent address of the student :
Postal code :
Town :
Country :
Phone number:
University email :
Personal email :

<p>CAUTION :</p> <p>Civil liability insurance of the student, including internships (Mandatory)</p> <p>Expiry date:</p> <p>Insurance company:</p> <p>The student must ensure that his insurance contract covers all personal injuries, material or immaterial damages that could be caused to others during his internship activity period and possibly in the country in question. The student should attach an explicit civil liability insurance certificate to the original internship agreement.</p> <p>the Healthcare Insurance Office contact, in case of accident (CPAM address : closest to the student home address) :</p>

<p>Was the internship found on the University website?:</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
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Contact your host organization or have a look on <http://fr.kompass.com/> or <http://www.pagespro.com/> (search : "raison sociale") for the APE/ Main activity, SIRET number, search on <http://www.societe.com>

If the internship is carried out at the University of Bordeaux, you should necessarily choose the SIRET n° 13001835100010 and APE code 85.42Z

SIRET/SIREN n° of the organization:.....
 Name of the organization:.....
 APE code (4 numbers and 1 character) number of staff:.....
 Main activity of the organization:
 Type of organization / Business line:.....
 Full address of the organization:.....
 Postal code Town
 Country:
 Phone number /Fax of the organization:
 Department and precise location of the internship:.....

Training supervisor at the host organization

☐ Mr. ou ☐ Mrs SURNAME Name :
 Phone /Fax: E-mail ::
 Position

Subject of internship

Type of internship: ☐ Compulsory internship ☐ Optional internship ☐ Internship in France ☐ Internship abroad
 TU Code of the internship / Opt :..... Number of ECTS credits :.....
 Topic of internship:.....
 Subject of internship : (Educational plan: goals and ends of the internship) :.....

 Position and tasks/ activities assigned to the intern (visible on the internship agreement):.....

 Skills to be acquired / developed during the internship:.....

Dates / Times - Terms of internship

From :.....
 To :.....
 Internship interruption : ☐ Yes ☐ No if yes, indicate the dates:
 From:.....
 To:.....
 Total duration of internship (number of hours in total) :.....
 (effective presence of the intern : 7 hours (consecutive or not) equal 1 day)
 Working time scheduled per week :.....
 Working time: ☐ Full time ☐ Part time
 Number of hours per week:.....
 (ex.99.99)
 Details about the work timetable:.....

 (Hours, working days ... Ex : Monday, Tuesday, Thursday, from 9 a.m to 12 a.m and from 2 p.m to 4 p.m)
 Time off and leaves of absence: (or procedure for suspension and termination during the internship)

Stipend – Benefits

(According to the art.L. 124-6 and D.124-8 of the Education code : the stipend shall become payable for internships greater than 308 hours)

Stipend during the internship: ☐ yes ☐ no

Amount of the stipend (in Euros) (ex : 999.99) :

☐ Hourly ☐ Monthly ☐ Net ☐ Gross

Amount of the stipend (in local currency):

Note : For an internship abroad, if the stipend is greater than 3,75€/hour or its equivalent in local currency, you should provide an insurance certificate (can be downloaded on the website), signed by the host organization before having the internship agreement signed by all the parties.

More information

How was the internship found?

☐ Internship offer ☐ Spontaneous application ☐ Network of contacts

Confidentiality of the Subject of internship : ☐ Yes ☐ No

Follow up of the intern (weekly meetings, phone meetings...)

List of granted benefits (housing, food, refunds...) :

Evaluation of the intern's activity: ☐ Dissertation ☐ Internship report

Terms of evaluation : ☐ Presentation ☐ Optional internship reporting

If the intern needs to work at night, on Sundays , or on public holidays, indicate:.....

Language of the internship agreement :

☐ French (National internship agreement, internship in France) ☐ English (internship agreement, internship abroad)

☐ German (internship agreement, internship abroad) ☐ Spanish (internship agreement, internship)

The internship academic advisor

Surname :

Name :

Phone :E-Mail :

Position/Discipline:.....

The legal representative at the host organization (signing party)

☐ Mr ou ☐ Mrs SURNAME : Name.....

Phone :E-mail :

Position.....

Date :

Signature of the internship academic advisor :

The internship academic advisor visa is ESSENTIAL to transmit this document to the academic secretarial office and entry the internship agreement on the ENT