2019 SUMMER YOUTH INTERNSHIP PROGRAM

STUDENT HANDBOOK

CareerSource SOUTH FLORIDA

The Children's Trust

MIAMI-DADE COUNTY

JPMorgan Chase & Co.

Royal Caribbean Cruises Ltd.

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2019 SUMMER YOUTH INTERNSHIP PROGRAM OVERVIEW

DATES/LENGTH

July 1, 2019 – August 2, 2019 (tentative)
Application Deadline is May 31, 2019

REQUIRED HOURS

150 HOURS – All hours must be completed prior to the end of the SYIP Program (August 2)

SUGGESTED SCHEDULE

30 HOURS PART TIME WEEKLY (Five Weeks)

STUDENT POPULATION

Rising 10 through 12 Grade high school students between the ages of 15-18 and enrolled in Miami-Dade County Public High Schools

ELIGIBILITY

Students must be eligible to work, reside in Miami-Dade County, open an account with the South Florida Educational Federal Credit Union the ONLY Financial Institution for the SYIP program; and complete the online pre-internship course. Emphasis will be given to at-risk students who meet one of the following criteria: Free/Reduced Lunch or English Language Learners (ELL) or Truant (15 or more unexcused absences).

STUDENT INTERVIEWS

Employers can register at https://miami.getmyinterns.org and schedule interviews at:
1) School site (prior arrangement must be made with school) or
2) Employer work location or
3) Mega NAF Student Industry Conference at Doubletree Hilton on 5/14/19 or
4) Parent Information Sessions on May 7, 8, 9 or 15 (Hosted by FIU) Location TBA
5) Employer Orientation Sessions on June 19 and 20 (Hosted by MDC) Location TBA

Please Note: The internship provider (Internship Employer) has the final say on the selection of the student intern pending that the student has met established criteria.

METHOD OF PAYMENT

Sponsored by Miami-Dade County, The Children's Trust, Royal Caribbean Cruise Ltd. and CareerSource South Florida

1) Summer Youth Internship Program (SYIP)
Students will receive 3 payments
- 1st week on the job $100 to cover Incidentals and includes transportation stipend
- 2nd payment Week 3 - $634.50
- 3rd payment Week 5 - $634.50 - after all assignments and timesheets are submitted to teacher/instructional internship supervisor

Students must open an account with the South Florida Educational Federal Credit Union(SFEFCU) the office credit union of the SYIP Program by May 31, 2019

2) COMPANY PAYROLL – paid directly to student

SUPERVISION

A workplace supervisor from the employing organization will evaluate the intern twice during the internship and an M-DCPS teacher supervisor will be assigned to the intern and will communicate twice with the workplace supervisor and intern (one on-site visit and one phone contact during the 5-week internship period).

STUDENT ACCIDENT INSURANCE

THERE IS NO LIABILITY FOR THE EMPLOYER AS ALL INTERNS ARE REQUIRED TO OBTAIN STUDENT ACCIDENT INSURANCE.
(Football Insurance not acceptable)

For more information, call the SYIP Hotline at 305-693-3005.

2019 Summer Youth Internship Program (SYIP), *July 1 through August 2*
Frequently Asked Questions (FAQs)

1. What is the Summer Youth Internship Program?
   A 5-week work-based learning experience between M-DCPS high school students and businesses and organizations throughout Miami-Dade County. The Children's Trust, Miami Dade County, Career Source South Florida, Royal Caribbean Cruise Lines and JPMorgan Chase are several sponsoring organizations.

2. Who is eligible?
   Rising 10th through 12th grade high school students between the ages of 15-18 and enrolled in Miami-Dade County Public Schools. Students must be eligible to work, reside in Miami-Dade County, open an account with the South Florida Educational Federal Credit Union, the ONLY Financial Institution of the SYIP program, and complete the online pre-internship course. The deadline to apply, which includes having completed the online course and opening a South Florida Educational Credit Union account is May 31, 2019. The SYIP requires completion of 150 hours during the five-week period, July 1 – August 2, 2019.

3. How do students enroll?
   A student must first be enrolled in the online pre-internship course by their school's Internship Teacher Champion and submit required completed documentation to teacher. Parents and students can contact the Internship Hotline (305-693-3005) to find out more about enrollment and their schools Internship Teacher Champion.

4. How are students placed with an employer?
   After completion of the online pre-internship course and submission of required documentation, students will be prompted to upload their resumes to Miami.getmyinterns.org, where they can begin to apply for jobs with internship providers. All internship providers have been approved by the Department of Career & Technical Education to hire students. ***Completing the online pre-internship course does not guarantee placement into this program.***

5. Is this a paid internship?
   If students are approved after completing all requirements, including being hired by a business/organization, they will receive grant payments or be placed on company payroll. Students will be notified to confirm that they are receiving grant payments by the Department of Career & Technical Education.

6. How do students get paid?
   The Summer Youth Internship Program is sponsored by The Children's Trust, Miami Dade County, Royal Caribbean Cruise Lines, CareerSource of South Florida and JPMorgan Chase. Students will receive three (3) payments directly deposited into their South Florida Educational Federal Credit Union, the ONLY Financial Institution of the SYIP Program, account:
   - By Friday, July 5, 2019 (week 1) - $100 to cover incidentals and includes transportation stipend.
   - 2nd payment $634.50 Week 3 – Friday, July 19, 2019
   - 3rd payment $634.50 Week 5 – Friday, August 9, 2019

   Students must open their credit union accounts by Friday, May 31, 2019, to receive payments on time. If a student already has a credit union account, they must inform the bank of their participation in the Summer Youth Internship Program. Payments will be delayed if a student has not turned in their time sheets on time. No more than two absences are allowed, and the required 150 total hours must be completed prior to the end of the internship on August 2nd.

7. How are students graded?
   Students completing the Summer Youth Internship Program will receive one high school academic credit. Students will be assigned a teacher over the summer who will collect their assignments and time sheets. Grade calculation: 50 % assignments and 50% internship supervisor assessment. Students may also receive dual enrollment college credit if they meet Miami Dade College established criteria and submit required forms by due date set by MDC.

8. Are students required to have Student Accident Insurance?
   All students enrolling in the Summer Youth Internship Program must have Voluntary Student Accident Insurance (Football Insurance is not acceptable). ***The insurance fee is nonrefundable.*** Health insurance that students have on their parents' or guardians' plan **does not meet** the requirement for Student Accident Insurance.

For more information, please call the Internship Hotline at 305-693-3005

MIAMI-DADE COUNTY PUBLIC SCHOOLS
SUMMER YOUTH INTERNSHIP PROGRAM (SYIP) PROTOCOLS
July 1 through August 2, 2019 (tentative)
Application Deadline: May 31, 2019

The internship is arguably the single most important component of being college and career ready. Students and parents must recognize its importance and plan accordingly. All stakeholders (students, school staff and internship providers) must be aware of and comply with non-negotiable protocols, rules and procedures.

Protocols for Schools

1. Administrators recruit and support a staff member to be the "Internship Champion." If a school does not have career academies where a CTE teacher can be the "Internship Champion," it is suggested that administrators recruit an available staff member.
2. Recruit interns who meet the eligibility criteria for the Summer Youth Internship Program (SYIP).
3. Announce Parent Meetings to students and parents-one session attendance required (Dates: May 7, 8, 9 and15, 2019; location and other details TBA; Hosted by FIU)
4. Internship Champion facilitates preparation of students with work skills online training (Odysseyware) and disseminates information concerning internship rules, procedures, and policies:
    - Manage enrollment and grading of online Intern Preparation Course. "Internship Champion" contacts CTE office for Odysseyware course professional development and enrollment of students. (Check in My Learning Plan for Internship Preparation Course – Facilitator Training. *Scheduled starting in February 2019)*
    - Review the Student Internship Handbook with the interns (posted on https://www.ctemiami.net/internships-2019/).
    - Review and approve student account for each intern candidate in ***Miami.GetMyInterns.org***
    - Support students in obtaining an account with the South Florida Educational Federal Credit Union by **May 31, 2019** for payment of grant stipends.
    - Publicize and encourage parents to attend a Parent Information Session tentatively scheduled and hosted by FIU on May 7, 8, 9 and 15 hosted by FIU.
5. Collect all required documents and submit to the district office electronically via online binder (LiveBinder), including proof of insurance, documentation of eligibility to work, etc. by **May 31, 2019**, if documents are not received by this date the student will not be eligible to participate in the SYIP program.
6. Notify the Career & Technical Education (CTE) office when the student is hired.
7. Notify student of SYIP status before the close of school year and give student the Internship hotline (305-693-3005) so that the student can contact the CTE Department with placement information or questions after the close of school.
8. Collect and submit by due date to the CTE office all required documents for dual enrollment through Miami Dade College (hard copies) by due date set by MDC, if student is eligible.

Protocols for Students

Pre-Internship:

1. Complete all requirements for eligibility as per checklist, including a W-9 Fillable Form (https://www.irs.gov/pub/irs-pdf/fw9.pdf) for federal income tax purposes.
2. Complete Online (Odysseyware) Pre-Internship Course by **May 31, 2019.**
3. Students will be approved to sign up at https://miami.getmyinterns.org upon completion of On-line (Odysseyware) Pre-Internship Course
4. Accept the first position offered.
5. Call to cancel any subsequent interviews once a position has been accepted.
6. Notify lead teacher/counselor/Internship Teacher Champion at the school and the CTE office after the close of school year when hired at 305-693-3005.
7. Open a South Florida Educational Federal Credit Union (SFEFCU) account by **May 31, 2019.** If not open on time, first payment will be delayed.
8. Clarify schedule with internship provider.
9. Inform parents of attendance required at ONE Parent Meeting (Dates: May 7, 8, 9 and15, 2019; location and other details TBA; Hosted by FIU)
10. SOLVE any transportation problems.
11. Complete a valid, Miami-Dade County Public Schools field trip form to participate in any activities away from the internship site. (No out-of-county travel allowed without prior district authorization.)

During the Internship

1. Work the ***entire length*** of the internship (5 weeks/150 hours, activities such as cheerleading camp, vacation, football practice, etc., cannot be used as excuses for absences during the internship.)
2. Report on the ***first and last day*** of the internship (an absence on the first or last day may be grounds for withdrawal from all summer services programs.)
3. Follow the schedule as assigned by the Internship Provider (internship supervisors assign hours; students may not have hours changed to suit their needs.)
4. Complete all assignments as indicated in Internship Assignment Course and found in Student Handbook (student intern receives high school credit and/or dual enrollment credit for the internship.)
5. Observe Summer School Attendance Policy (no more than two absences allowed.)
6. Make up any hours for stipend payment purposes, if applicable. All hours must be completed prior to the end of the SYIP program (August 2, 2019.)

Protocols for Internship Providers

1. Sign-up at Miami.getmyinterns.org
2. Registered to do business in the state of Florida and located in Miami Dade County.
3. Agree and sign the cooperative (Internship) agreement (sample in the student handbook).
4. Assign a worksite mentor.
5. Interview the student intern for placement.
6. Participate in an internship provider orientation.
7. Sign a M-DCPS field trip form that will allow the worksite supervisor to take the student intern off-premises for official work-related meetings
8. Ensure that an Emergency Contact Form is on file at the office for each student intern.
9. Work with Internship Teacher Supervisor for any issues or problems, or call Internship Hotline 305-693-3005.
10. Review intern's time card on a weekly basis and sign at the end of the SYIP five-week program
11. Complete an assessment of the intern at the end of the SYIP five-week program.

For copy of Internship Provider handbook, go to: posted on https://www.ctemiami.net/internships-2019/

INTEGRATING INTO THE INTERNSHIP ENVIRONMENT

Do's and Don'ts

Do:
- be on time.
- be responsible.
- be dependable.
- be cooperative.
- be honest.
- be pleasant and polite.
- be alert coming and going to work.
- dress for success.
- be a team player

Don't:
- use street language.
- eat at your desk.
- use the Internet for personal business without prior approval.
- check personal e-mails.
- chew gum.
- play personal music devices while on the job.
- text on the job

Using the Telephone/Cellular Phone

- Ask permission to use the telephone for personal calls.
- If you are permitted to make personal calls, make them short.
- Do not make any long distance personal calls.
- Do not take or make personal calls from your cellular phone.

You and Your Internship Supervisor (at work site)

- Make a note of your supervisors' names and telephone number both Internship Supervisor and M-DCPS Instructional Supervisor, in case of emergency.
- If you are ill and cannot go to work, call your Internship Supervisor and the M-DCPS Department of Career and Technical Education at 305-693-3030, as soon as possible.
- If you become ill at work, notify your Internship Supervisor and ask permission to leave.
- Listen carefully when instructions are given. If necessary, take notes. Ask questions when you do not understand the instructions.
- Follow instructions; do not improvise. There may be a reason why a job is done in a particular manner.
- If you are directed to use equipment you are unfamiliar with, ask for instructions.
- Do not risk injuring yourself or damaging the equipment.
- The records you handle are confidential. Do not disclose information you may see.
- Ask your internship supervisor if there is additional work if you feel underutilized.[1]

Getting Along with Others

- If a problem arises, try to solve it with your co-workers. If not, ask for assistance from your internship supervisor and/or the M-DCPS Instructional Supervisor.
- If you are given an assignment by more than one person, check with your internship supervisor as to which task takes priority.
- Pitch in and help when things are busy. Be willing to stay after work, however, stay alert and be safe.
- Observe the individuals with whom you work. What characteristics do they have that will help you to succeed? Work to develop them.

INTERNSHIP ASSIGNMENTS

The internship assignments are designed to provide experience in and first-hand knowledge of the workplace environment. Through these assignments, you will gain skills in the areas of interpersonal relations, resources, company organization, and technology. These experiences will also help you to determine your compatibility with a career path. **All written assignments must be done on your own time** and must be typed. Complete sentences, proper grammar and punctuation are also essential. The guidelines for written assignments can be found in the Introduction section of this handbook.

Internship Week, Assignment Theme and Due Date (TBA)

WEEK 1 **RESOURCES**

WEEK 2 **PLANNING AHEAD**

WEEK 3 **REFLECTION**

WEEK 4 **ASSESSMENT**

WEEK 5 **TECHNOLOGY**

WEEK 1-RESOURCES

After completing this assignment, you will become aware of goals and objectives of the internship, your job responsibilities, how to develop your personal goals, the importance of time management.

Assignments:

1. Develop a list of personal goals & objectives that you would like to accomplish during your internship.

    a. Set up a meeting time with your internship supervisor to discuss your goals, objectives, and job responsibilities.

    b. From that meeting, formulate a revised outline of realistic goals, objectives, and goal-related activities as well as the anticipated timeline for completion.

2. Locate the **Internship Assessment** in the handbook**.** Review the performance factors.

    - Explain to your internship work supervisor that the assessment process should be completed by Week 3. Then, ask the following question and record your internship supervisor's responses.
        - "What criteria will be used to evaluate my performance on the indicators on the **Internship Provider Internship Assessment?**"

3. Complete and turn in the time sheet for Week 1. Remember to have your WORK internship supervisor sign it.

4. If you will be receiving a grant stipend, your funds will be automatically deposited to your bank account with the South Florida Educational Federal Credit Union with three deposits made to your account during the internship training program depending on whether your hours and assignments are turned in on a timely basis.

WEEK 2- PLANNING AHEAD

As an intern, it is important to focus on priorities, goals, and objectives as well as plan ahead. This knowledge will positively impact your work environment and relationships with co-workers as well as supervisors. Detailed directions for the final assignment and an upload link are provided in the online Internship course.

Assignments

1. Write or attach a document identifying the history, mission, and vision of the internship organization. **Detailed directions and how to submit document will be provided in the online Internship course**.

2. Begin taking/collecting photos for your PowerPoint/Photostory assignment that is due on Week 5.

3. Complete and turn in the time sheet for Week 2. Remember to have your WORK internship supervisor sign it.

WEEK 3- REFLECTIONS

Reflection allows an intern to consider the work he/she has provided to an organization and to better understand their role within the organization. Having the time to reflect also gives you the opportunity for personal growth when you can look within and see the skills that you have acquired through this internship. Detailed directions and an upload link are provided in the online Internship course.

Assignments

1. Review the goals you expected to achieve during your internship with your supervisors and discuss with them the goals you accomplished and explain why you feel achievement occurred. If your goals were not achieved, clarify why you feel they were not reached.
2. Complete the **Self-Evaluation Form** and submit the form to your Instructional Supervisor in the online Internship course. See course lesson for directions.
3. Complete and turn in the time sheet for Week 3. Remember to have your WORK intern supervisor sign it.

WEEK 4- ASSESSMENT

During the internship, you have encountered performance skills necessary for workers to function effectively in high performance organizations that will be able to compete in a global economy.

These skills include problem-solving, reasoning, critical thinking, working in teams, allocation of resources, interrelationships and systems, and the uses of information and technology.

WEEK 5-TECHNOLOGY

There are many benefits of using technology in the workplace. Technology can improve the up-to-date information and communication resources, increase work performance, and provide a link to needed resources. Detailed directions and an upload link are provided in the online Internship course.

Assignment

1. Your job task is to create a PowerPoint/PhotoStory presentation about your Internship experience. You will be graded on the following:
    a. PowerPoint/PhotoStory presentation: content, creativity, grammar and spelling, slide transitions, clipart and photos
    b. You may present this project to your colleagues in the junior class upon your return to school. This presentation may serve as your first assignment in your senior Academy class. *Check with your lead teacher once school starts in August for submission and presentation at your school.*

CRITERIA:

- Minimum of 15 slides which should include a title and closing slide.
- Include a photo of your office, company, internship supervisor or co-workers and company logo.
- Content: title slide, history of organization, organization chart, duties and responsibilities, recommendations to future interns, closing slide
- **Narration: the presentation should be narrated and self-running.**
- Internship Grading criteria:
    - Format: In the online course, you will either upload an electronic copy, (you may need to compress any photos to reduce the size of the file) or upload a link to a "cloud" storage site, such as "Google, Onedrive, Dropbox, etc." and send an invite to the Instructional Supervisor in order to view the file (by email and through the online course message box.)

DUE DATE:

1. Final project for Internship credit deadline TBA**.** Submit the project in the online Internship course. See course lesson for directions.
2. Complete and turn in the time sheet for Week 5. Remember to have your WORK internship supervisor sign it.

Note: *Deadline for submitting FINAL assignments and documents will be given to interns at the beginning of the internship. All documentation must be received by the Instructional Supervisor before the end of the internship.*

INTERNSHIP ASSIGNMENT CHECK OFF*

Week 1 -RESOURCES	**PERCENTAGE**
☐ Goals, Objectives, Goal-related Activities	10
☐ Timesheet	5
Week 2 –PLANNING AHEAD	
☐ Mission, Vision, and Company History	10
☐ Begin taking/collecting photos for PowerPoint/Photostory	--
☐ Timesheet	5
Week 3 -REFLECTIONS	
☐ Self-Evaluation Form	10
☐ Timesheet	5
Week 4 -ASSESSMENT	
☐ Timesheet	5
Week 5 -TECHNOLOGY	
☐ PowerPoint/Photostory	45
☐ Timesheet	5

Scale: **A**=100-90 percent
B=89-80 percent
C=79-70 percent
D=69-60 percent
F=59 percent or less

***The total percentage (50%) will be averaged in with the internship supervisor evaluations (50%) to determine the final grade.**

MULTIMEDIA PRESENTATION PROJECT: Internship Powerpoint/Photo Story

CATEGORY	7	5	3	1
Requirements	All requirements are met and exceeded, such as: minimum of 15 slides, including title and closing slide; photo and narration.	All requirements are met.	One requirement was not completely met.	More than one requirement was not completely met.
Content	Covers topic in-depth with details and examples such as history of organization, organization chart.	Includes essential knowledge about the topic. Subject knowledge appears to be good.	Includes essential information about the topic but there are 1-2 factual errors.	Content is minimal OR there are several factual errors.
Attractiveness	Makes excellent use of font, color, graphics, effects, etc. to enhance the presentation.	Makes good use of font, color, graphics, effects, etc. to enhance the presentation.	Makes use of font, color, graphics, effects, etc. but occasionally these detract from the presentation content.	Use of font, color, graphics, effects etc. but these often distract from the presentation content.
Organization	Content is well organized using headings or bulleted lists to group related material.	Uses headings or bulleted lists to organize, but the overall organization of topics flawed.	Content is logically organized for the most part.	There was no clear or logical organizational structure, just lots of facts.
Mechanics	No misspellings or grammatical errors.	Three of fewer misspellings and/or mechanical errors.	Four misspellings and/or grammatical errors.	More than 4 errors in spelling or grammar.
Legend: A=30-35, B=25-29, C=20-24, D=1-19, F=0				

Florida Department of Education
COURSE DESCRIPTION - GRADES 9-12

Subject Area: Experiential Education
Course Number: 8845139-AOHT/ 8815130 – AOF/ 0500300LS – AOIT/ 0500300LS – AOE
Course Title: Hospitality Internship I/ Financial Internship I/ Executive Internship I (Leadership Skills)
Credit: 1.0 credit (high school)

A. Major concepts/content: The purpose of this course is to provide a practical introduction to the work environment through direct contact with professionals in the community.

The content should include, but not be limited to, the following:

1. Discussion of professional job requirements
2. Building vocabulary appropriate to the area of professional interest
3. Development of decision-making skills
4. Development of personal and educational job-related skills

B. Special note: The nature of this program requires great flexibility in the duration of the course and the number of contact hours. Student performance standards must be designed to meet the uniqueness of the course.

C. Course Requirements: After successfully completing this course, the student will:

1. Describe educational, personal, and professional requirements of the profession.
2. Understand and use vocabulary appropriate to the profession.
3. Understand special needs unique to a particular profession.
4. Demonstrate knowledge of special technologies.
5. Read literature related to the profession.
6. Exhibit growth in functioning in the adult world and professional community.
7. Use appropriate decision-making techniques in exploring career possibilities.
8. Demonstrate appropriate responsible behavior in various situations.
9. Demonstrate application of academic skills in the performance of the internship responsibilities.

Florida Department of Education
Internship Training Program
Dual Enrollment Credit – Miami Dade College

Statewide Course:	**Internships/Practicums/Clinical Practice**	
MDC Course Number:	**EGN 1949**	**Engineering (AOE)**
	HFT 1949	**Hospitality Management (AOHT)**
	GEB 1949	**General Business Finance (AOF)**
	CIS 1949	**Computer Science & Computing Technologies (AOIT)**
		(Minimum 160 hour requirement)
Credit:	**3 cr.**	

Course Descriptions:

Engineering: This is a capstone course designed for students majoring in engineering programs; students will apply skills and knowledge that they have acquired through their program of study in a real-work environment.

Hospitality Management: Practical application in a clinical setting of knowledge acquired in a classroom related to lodging, restaurants, travel and tourism; individuals to perform marketing and management functions and tasks in enterprises engaged in hospitality functions, including lodging services and related event and convention services, food and beverage service, and travel and tourism.

General Business: Practical application in a clinical setting of knowledge acquired in the classroom related to business or administrative policy, international business and finance, small business, social, legal political and ethical environments of business.

Computer Science & Computing Technologies: This course is designed as a work experience for students majoring in computer information systems programs. Student will apply their skills and knowledge that they have acquired through their program of study in a real work environment.

Competencies:
Competencies will include but not be limited to knowledge of:

- Workplace goals and structure
- Relevant industry regulations
- Workplace practices and procedures
- Process control in an industrial workplace environment
- Specific skills-sets employed in an industrial workplace environment
- Workplace professionalism

Transfer Status: Not automatically transferable.

Students must meet the Miami Dade College dual enrollment eligibility requirement of having an unweighted 3.0 GPA and certified as college ready in Reading and Writing by passing one of the following tests: PERT, SAT/ACT, FCAT. Refer to the following link for testing cutoff requirements:
http://www.mdc.edu/main/testing/criteria/college_credit_certificate_programs.aspx#fcelptscores

2019 SUMMER YOUTH INTERNSHIP PROGRAM
TIME SHEET

***TIME SHEET will be online this year - with special instructions.**

Timesheet DIRECTIONS will be posted in the Employer Internship Provider handbook.

SAMPLE ONLY Will be completed online by student interns during internship.

SUMMER YOUTH INTERNSHIP PROGRAM
SELF – EVALUATION

Student's Name: _____

School Name: _____

Internship Site: _____

The questions that follow ask you to evaluate your internship experience over the last five weeks. Your input in completing this questionnaire will assist us in improving the existing program. Please turn this evaluation in to your Instructional Supervisor with the assignment for week three.

I. In what career field did you intern? _____

Please use the following rating scale: **Strongly Agree 4 • Agree 3 • Disagree 2 • Strongly Disagree 1**

II. Evaluate your work environment by writing in the space provided the number that best describes how you feel. Explain the ration ale for any rating other then 4 or 3.

___ 1. Employees in my department understood their job requirements and went about meeting them.
___ 2. I knew the requirements of my internship assignment.
___ 3. Employees in my department cooperated in order to get the job done.
___ 4. Care was taken to insure the work area was pleasant for the employees.
___ 5. My internship assignment gave me a feeling of personal accomplishment.
___ 6. I was able to use my talents and abilities in accomplishing my duties.

III. Evaluate your internship supervisor by writing in the space provided the number that best describes his/her role. Explain the rationale for any number other then 4 or 3.

___ 1. Ability to motivate employees
___ 2. Ability to delegate authority
___ 3. Ability to solve work-related problems
___ 4. Sense of fairness
___ 5. Ability to communicate effectively with employees
___ 6. Ability to be diplomatic and to provide performance feedback

IV. Use the criteria below to evaluate the overall internship experience.

___ 1. How satisfied were you with the pre-placement process at your school?
___ 2. How satisfied are you that your internship assignment broadened your work-related knowledge?
___ 3. How satisfied were you with your opportunities to learn varied tasks within your department?
___ 4. How satisfied were you with the information/guidance you received from your Internship Supervisor?
___ 5. How satisfied were you with the guidance you received from your Instructional Supervisor?

V. Taking everything into consideration, how satisfied were you with:

___ 1. Your internship assignment?
___ 2. Your work environment?
___ 3. The company you were assigned?
___ 4. The role of your Instructional Supervisor?
___ 5. The internship program?

VI. Answer the following questions:

What are the strengths of the program? _____

What are the weaknesses of the program? _____

How can the program be improved? _____

The following Internship Assessment will be completed online by the Internship Provider to evaluate the student intern's performance.

#	Section	Question	Response	Value
1	Student Evaluation	Behaves ethically		
2	Student Evaluation	Listens attentively		
3	Student Evaluation	Comprehends information		
4	Student Evaluation	Communicates verbally		
5	Student Evaluation	Communicates in writing		
6	Student Evaluation	Practices safety procedures		
7	Student Evaluation	Maintains a positive attitude		
8	Student Evaluation	Responds appropriately to directions by supervisor		
9	Student Evaluation	Is productive		
10	Student Evaluation	Uses time wisely		
11	Student Evaluation	Strives to do an excellent job		
12	Student Evaluation	Collaborates with co-workers		
13	Student Evaluation	Maintains a professionally groomed appearance		
14	Student Evaluation	Adapts to diverse situations		
15	Student Evaluation	Uses necessary technology		
16	Student Evaluation	Is punctual		
17	Student Evaluation	Takes initiative in appropriate ways		
18	Student Evaluation	Asks appropriate questions		
19	Student Evaluation	Seeks to learn		
20	Student Evaluation	Prioritizes tasks appropriately		
21	Student Evaluation	Shows appropriate persistence		
22	Student Evaluation	Completes assigned tasks		
23	Student Evaluation	Exhibits professional behavior as defined by the industry or field		
24	Student Evaluation	Understands career requirements in the industry or field		
25	Student Evaluation	Understands the culture, etiquette, and practices of the workplace/ organization		
26	Student Evaluation	Please contribute additional observations or explanations of your ratings; particularly if the ratings are "excellent" or "needs improvement.		
27	Program Evaluation	Which industry represents your company?		
28	Program Evaluation	Employer orientation		
29	Program Evaluation	Employer resources (Miami.getmyinterns.org website, internship hotline, and internship handbook)		
30	Program Evaluation	Information provided about the internship (email communications, website, promotional materials)		
31	Program Evaluation	District support provided (SYIP Staff)		
32	Program Evaluation	Responses to employer inquiries were accurate and timely		
33	Program Evaluation	The SYIP Program provided a meaningful way for our company to support student success and develop workplace and leadership skills that will enhance the future workforce.		
34	Program Evaluation	What are the strengths and/or weaknesses of the program?		
35	Program Evaluation	How can the program be improved?		
36	Program Evaluation	Would you be interested in participating in next year's program?		

The following Internship Assessment will be completed online in NAFTrack by the Internship Provider to evaluate the NAF Academy student intern's performance.

NAFTrack CERTIFICATION

NAFTrack Certification Internship Assessment

Directions:
Please answer the following items based upon your experience observing the student intern. ***It is important that you be objective and candid in your assessment of the intern, as your responses carry credibility to the process.*** If you have not had the opportunity to observe the student's skill level in a particular area, please respond N/A: "No Opportunity to Observe."

Any item receiving a score of 1 requires the supervisor to comment on the reason for this score.

SCORE	1 Does Not Meet Expectations	2 Approaches Expectations	3 Meets Expectations	4 Exceeds Expectations	N/A No Opportunity to Observe

Part I. Core College and Career Readiness Skills					
Collaboration & Teamwork that includes the following skills:	1	2	3	4	NA
Acts and collaborates as a team member					
Exhibits ability to work with diverse individuals					
Interacts with supervisors, clients, and teammates appropriately					
Communication that includes the following skills:	1	2	3	4	NA
Demonstrates effective verbal communication					
Constructs effective written communications					
Listens attentively and observes work environment					
Creativity & Innovation that includes the following skills:	1	2	3	4	NA
Incorporates creativity and innovation into tasks					
Critical Thinking and Problem Solving that includes the following skills:	1	2	3	4	NA
Thinks critically, formulates, and solves problems					
Demonstrates precision and accuracy					
Utilizes systems thinking					

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Information Management that includes the following skills:	1	2	3	4	NA
Locates, comprehends, and evaluates information					
Applies information technology when completing tasks					
Initiative & Self Direction that includes the following skills:	**1**	**2**	**3**	**4**	**NA**
Demonstrates flexibility and adaptability when completing tasks					
Takes initiative, is self directed and resourceful					
Asks appropriate questions					
Demonstrates awareness of own abilities and performance					
Comprehends career opportunities/requirements in the industry or field overall					
Understands career opportunities/requirements in the specific occupational area related to the internship or student project					
Professionalism & Ethics that includes the following skills:	**1**	**2**	**3**	**4**	**NA**
Demonstrates integrity and ethical behavior					
Manages time effectively; punctual					
Takes responsibility for learning; seeks to learn					
Prioritizes tasks					
Demonstrates persistence in completing activities					
Brings tasks and projects to completion					
Exhibits responsible and professional behaviors as defined by the industry or field					
Understands the culture, etiquette, and practices of the workplace or the project client's organization and knows how to navigate the organization					
Quantitative Reasoning that includes the following skills:	**1**	**2**	**3**	**4**	**NA**
Uses effective quantitative reasoning					

For each of the ratings above in Part I, evidence (examples of performance) can be provided for any rating in the online form, but examples must be provided for any skill with a rating of 1. If using the paper form to complete the assessment, please add required examples on additional pages marked to coincide with the rated dimension.

Part II. Position-Specific Technical Skills

Please list one to three position-specific technical skills of particular significance in your industry, occupation, workplace, or project that the student was clearly expected to demonstrate during the internship. ***Please do not repeat general skills assessed in Part I.*** Examples of position-specific skills could include computer networking, accounting skills, event planning, and second language fluency, that might appear as requirements on a job description. **Part II is currently optional and does not count toward the student's certification.**

Please rate the student on these skills demonstrated according to the rating scale below:

1	**2**	**3**	**4**
Skill Falls Below Expectations	Skill Approaches Expectations	Skill Meets Expectations	Skill Exceeds Expectations

Skill	Rating			
	1	2	3	4
	1	2	3	4
	1	2	3	4

Forms & Instructions

Forms can be completed online and printed for signature

or

save file with Adobe Acrobat Pro or other software

2019 Summer Youth Program Internship

For each prepared student to be considered for placement in the 2019 Summer Youth Internship Program this document needs to be completed, attached to each student folder and submitted to the Department of Career and Technical Education. **All documents must be uploaded to the LiveBinder District Online Internship Folder by "Internship Teacher Champion."**

Student Name: _____ ID #: _____

Email: _____ Telephone: _____

School: _____ Academy (if enrolled): _____

Student Information Check-off Sheet

The following documents must be completed and placed into LiveBinder folder (original signed copies of some forms must be submitted, not uploaded) by Internship Champion Teacher, in order for student to be CONSIDERED for an internship.

INSTRUCTIONS and blank copies of forms can be found on following pages of handbook:

FORMS FOR LIVEBINDER	UPLOADED
Placement Information Form	
Student's Resume	
Summer School Registration Form	
Emergency Student Data Form	
Social Security Verification Form*	
Proof of School Accident Insurance	
Field Trip Form	
Authorization for Photography/Video	
Pre-Internship Course Completion Certificate Odysseyware	
Proof of Credit Union Account with Summer Internship Direct Deposit from South Florida Educational Federal Credit Union. Students receive this form from credit union.*	

FORMS - ORIGINAL COPY to be SUBMITTED	SUBMITTED
Social Security Verification Form*	
Proof of Credit Union Account with Summer Internship Direct Deposit from South Florida Educational Federal Credit Union Students receive this form from credit union.*	
TANF Form (completed per instructions)**	
W-9 Completed in Fillable IRS form ** (https://www.irs.gov/pub/irs-pdf/fw9.pdf)	

**Form should be uploaded to LiveBinder folder AND original copy submitted in school envelope*

*** DO NOT UPLOAD to LiveBinder, Original copy submitted in school envelope*

2019 SUMMER YOUTH INTERNSHIP PROGRAM
PLACEMENT INFORMATION

STUDENT'S NAME_____ID #_____

SCHOOL NAME: _____ GRADE: _____

NAF ACADEMY: _____ LEAD TEACHER: _____

The student must meet all eligibility requirements to be considered for program.

This student has been hired by the company below:

Company/Organization: _____

Contact Person: _____Title: _____

Address: _____City: _____Zip: _____

Phone: _____Email: _____

Dates of Employment: _____

Method of Payment:

☐ **Company Payroll Full time____ or Part time____**

☐ **Summer Youth Internship Grant**

CareerSource SOUTH FLORIDA | The Children's Trust | MIAMI-DADE COUNTY | JPMorgan Chase & Co. | Royal Caribbean Cruises Ltd.

Career and Technical Education
10151 NW 19 Avenue
Miami, FL 33147
For questions, please call 305-693-3005

****

For Office Use Only:

Supervisor Assigned:_____ _____

Cell Phone:_____

SUMMER SCHOOL REGISTRATION FORM

DATE _____ **I.D.#** _____

PROGRAM _____ **SCHOOL-SITE** _____

FUTURE GRADE LEVEL _____

NAME _____
(Legal **(Last, First, Middle)**

NAME _____
(Assumed) **(Last, First, Middle)**

STUDENT'S ADDRESS _____
(No., Street)

_____ **HOME PHONE** _____
(City, State, Zip Code)

MAILING ADDRESS _____
(If different from the student's address)

DATE OF BIRTH _____ **BIRTHPLACE** _____

PRIMARY LANGUAGE: PARENT _____ **STUDENT** _____

FATHER'S NAME _____ **OCCUPATION** _____

EMPLOYER _____ **WORK PHONE** _____

MOTHER'S NAME _____ **OCCUPATION** _____

EMPLOYER _____ **WORK PHONE** _____

GUARDIAN'S NAME _____ **RELATIONSHIP** _____
(Name of guardian with whom student lives if not the parent)

CURRENT SCHOOL _____
(School Name)

SCHOOL ADDRESS _____
(No., Street)

_____
(City, State, Zip Code)

LAST MIAMI-DADE COUNTY PUBLIC SCHOOL ATTENDED _____

STUDENTS NEW TO MIAMI-DADE COUNTY PUBLIC SCHOOLS SHOULD SEE THE INITIAL ENTRY CHECK LIST ON THE BACK.

EMERGENCY STUDENT DATA FORM

School No. /Name _____ I.D. Number _____ Grade ___ Section _____

Student's Last Name | APP | First Name | Middle Name

Address _____

Indicate primary contact phone number to be used for emergencies and automated messaging: _____

Last Name | First Name | Relation | Place of Employment

Telephone | Cellphone | Email

Last Name | First Name | Relation | Place of Employment

Telephone | Cellphone | Email

Is either parent in the Military? Y ___ N ___ Branch _____

Kindergarten Only: Was the child in pre-school or child care? Yes _____ No _____

Was the full cost paid by you? Yes ___ No___ What type? Headstart ___ ESE ___ Migrant ___ Other ___ Unknown ___

EMERGENCY CONTACT INFORMATION: Additional data is requested in the event of an emergency illness of your child. It is the parents' legal responsibility to assume medical and transportation expenses for your child. In the event that parents of child cannot be reached, provide contact information below of two persons, by order of priority.

(Name) | *(Relation to Student)* | *(Address)* | *(Phone at Work)*

(Name) | *(Relation to Student)* | *(Address)* | *(Phone at Work)*

Family Doctor | Phone | Preference of Hospital | Phone

Student health/allergy data which should be known in an emergency: _____

_____

AUTHORIZATION FOR RELEASE OF STUDENTS FROM SCHOOL: Please provide names of persons authorized or not authorized to take your child from school during the school day. Note that persons listed as emergency contacts are not authorized to pick up your child, unless listed in this section.

Authorized: _____ _____ _____

Authorized: _____ _____ _____

Not authorized: _____ _____ _____

Not authorized: _____ _____ _____

IT IS THE PARENTS' RESPONSIBILITY to inform the school in person of any changes in the information listed on this form. Under penalties of perjury, I declare that I have read the foregoing [document] and that the facts stated in it are true.

Date: _____ Printed Parent Name: _____

Parent's Signature Verification: _____

Parents/guardians have the right to review the professional qualifications of their child's classroom teacher(s) including the licensing status, degree major, graduate degree(s) and the field of certification. This "right to know", available from your child's school, includes whether your child is receiving services provided by paraprofessionals and, if so, their qualifications.

Whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his/her official duty shall be guilty of a misdemeanor of the second degree under Fla. Stat. § 837.06, or whoever makes a false verified declaration is guilty of the crime of perjury, a felony of the third degree, under Fla. Stat. § 92.525, which are punishable as provided in Fla. Stat., §§ 775.082, 775.083 and 775.084.

The Emergency Student Data Form governs early release withdraw of the student. The person who signs/verifies this form is responsible for providing truthful and accurate information. If the student's parents are divorced or separated, the enrolling parent is responsible for providing information that is consistent with the most recent court order governing such matters as divorce, separation or custody.

Social Security Verification Form

Date_____

Name of Student – PRINT or type name exactly as printed on Social Security CARD

_____

Student ID #: _____

School Name: _____

The last 4 digits on card: _____

I, _____, (print name) verify that the student listed above has a social security card which I have seen. The card does not state that additional documentation is needed for work, and therefore indicates that this student is eligible to work.

_____, Signature (person verifying card)

I am:

_☐_ Internship Teacher Champion
_☐_ Academy Teacher
_☐_ Guidance Counselor
_☐_ School Administrator
_☐_ M-DCPS District Staff

DO NOT COPY OR SCAN SOCIAL SECURITY CARD

This form will be uploaded to LiveBinder documentation folder; but also FORM with ORIGINAL SIGNATURE must be submitted (in school forms envelope)

STUDENT INSURANCE

All students enrolling in the Summer Youth Internship Program must have Voluntary Student Accident Insurance (Football Insurance is not acceptable.) The insurance fee is nonrefundable.

Health insurance that students have on their parents' or guardians' plan does not meet the requirement for Student Accident Insurance.

TO SIGN UP FOR INSURANCE, GO TO:

https://www.hsri.com/K12_Enrollment/Main/default.asp

Can submit receipt copy, or copy from activities director showing paid insurance (not Football insurance.)

Fill out basic information, obtain parent signature. Form is for student going to location other than internship work location if needed.

Division of Athletics, Activities and Accreditation

MIAMI-DADE COUNTY PUBLIC SCHOOLS
PARENT PERMISSION FORM -- FIELD TRIP

Field trips are not mandatory. They are designed to enhance curriculum, to encourage student participation in extra-curricular activities, and to serve as community service projects.

SECTION I. IDENTIFYING INFORMATION

SCHOOL _____ DATE _____

STUDENT'S NAME _____ I.D. NO. _____ GRADE/HR _____

SECTION II. NOTIFICATION TO PARENT

_____ is planning a field trip for _____ to _____
School Group Sponsor Name — Name of School Group — Destination

The purpose of the trip is _____

TRANSPORTATION: Private Vehicle _____ Bus _____ Airline _____ Other _____
Name of Carrier — Please Specify

This trip will be chaperoned by _____ Cost to each student $ _____
(Total Number of Chaperones)

I understand that if I am unable to pay for the cost of this trip, and I want my child to participate, where appropriate, my child will be given an opportunity to raise funds through authorized fund-raising activities, or be given assistance in identifying another funding source. (This provision does not apply to activities not directly related to classroom instruction, e.g., Grad Nite, football games, banquets.)

DATES OF TRIP: *(Include departure/return time)* FROM _____ TO _____

--The above time schedule and/or personnel may be changed due to unforeseen circumstances. --

PLEASE KEEP THE TOP PORTION FOR YOUR INFORMATION.

RETURN THE BOTTOM PORTION TO THE TEACHER.

SECTION III. PARENT/GUARDIAN'S WRITTEN PERMISSION TO PARTICIPATE IN ACTIVITY

I hereby give permission for my child _____ Student I.D. No. _____
(Child's Name)

to participate in the field trip to _____
(Destination)

DATES OF TRIP: *(Include departure/return time)* FROM _____ TO _____

I have completed the EMERGENCY CONTACT INFORMATION in Section IV (see below).

SIGNATURE OF PARENT/GUARDIAN _____ DATE _____

SECTION IV. EMERGENCY CONTACT INFORMATION

1. Name of parent/guardian _____
2. Parent/Guardian Phone No(s). Home _____ Business _____ Cell _____
3. In case parent/guardian cannot be reached, please contact: _____ Relationship _____ Telephone No. _____
4. Please list any insurance policy covering your child _____ Policy No. _____
5. Physician's Name _____ Telephone No. _____
5. Only if applicable, complete the following:
   a. My child has the following medical problem: _____
   b. My child takes the following medications regularly: _____
      (Proper Medical form #2702 is on file at the school)
   c. My child has the following allergies: _____

I AUTHORIZE MEDICAL TREATMENT FOR MY CHILD IN CASE OF ACCIDENT OR ILLNESS WHILE ON THE TRIP.

PARENT/GUARDIAN SIGNATURE _____ DATE _____

FM-2431 Rev. (09-12)

AUTHORIZATION FOR PHOTOGRAPHY/VIDEO

I, _____, the parent or
(print parent guardian's name)

guardian of _____ hereby authorize
(print student name)
and give consent to all Summer Youth Internship Program service providers, funders, and Miami-Dade County Public Schools as follows:

I hereby:

❑ consent and authorize or ❑ do not consent and authorize

the staff of all Summer Youth Internship Program service providers, funders and Miami Dade County Public Schools to take/use still photographs, digital photographs, motion pictures, television transmission, and/or videotaped recordings (hereinafter "Recordings") of me, my children, or my wards for educational, research, documentary, and public relations purposes.

_____ _____
Signature of Parent or Guardian Signature of Witness

_____ _____
Date Date

Any such Recordings may reveal your identity through the image itself without any compensation to you, your children or wards.

Any and all Recordings taken of you, your children or wards shall be the sole property of the service providers and funders.

With regard to the use of any Recordings taken of you, your children or wards, you hereby waive any and all present and future claims you may have against all Summer Youth Internship Program service providers, funders and Miami-Dade County Public Schools their staff, service providers, employees, agents, affiliates and Board members.

AUTORIZACION PARA FOTOGRAFIA/VIDEO

TRANSLATION WILL BE UPDATED SOON - DO NOT DISTRIBUTE YET

OTORIZASYON POU DWA FOTOM/VIDEO

TRANSLATION WILL BE UPDATED SOON - DO NOT DISTRIBUTE YET

CERTIFICATE OF COMPLETION

This form is printed out by the student at the end of the Internship Preparation Course. Teacher should vertify that the student has completed the course; sign the certificate; scan and upload to LiveBinder folder.

CERTIFICATE *of* COMPLETION

THIS ACKNOWLEDGES THAT

HAS SUCCESSFULLY COMPLETED THE

ONLINE
INTERNSHIP PREPARATION COURSE

VOID

Teacher Signature_____

South Florida Educational Federal Credit Union

THE OFFICIAL FINANCIAL INSTITUTION OF SYIP

2019 SUMMER INTERNSHIP PROGRAM

VERY IMPORTANT: FOLLOW THE STEPS TO OPEN YOUR ACCOUNT AT **SOUTH FLORIDA EDUCATIONAL FEDERAL CREDIT UNION.** FAILURE TO COMPLETE YOUR APPLICATION BY THE **MAY 31ST** DEADLINE WILL CAUSE DELAYS AND MAY PREVENT YOU FROM BEING PAID.

1. **What do I need to open my account with South Florida Educational Federal Credit Union?**
   - ☐ *A minimum deposit of $5 (payable during your first Credit Union branch visit or when a Credit Union representative is attends your school. Your teacher will have the scheduled dates).*
   - ☐ *Student's Social Security card – This can be the original, a copy or a photo (on a smart phone).*
   - ☐ *Student's School ID Number*
   - ☐ *One of the following valid, non-expired form of identification listed below:*
     Florida Driver's License, Florida State Identification, U.S. Passport, Resident Alien Card or Military ID

2. **How do I open my SFEFCU summer intern account?**
   - *a) Go to www.sfefcu.org/2018internship and complete the online application.*
   - *b) Print the application.*
   - *c) Bring it with you to your scheduled account opening day at your school or open your account at one of the SFEFCU's seven branches or your high school branch. (Locations are on the back).*

3. **You will need the following information to complete your application.**
   - ☐ *Beneficiary Information (This is the person(s) who will receive your money left in your account in case of your death, example: parent, sibling, etc.)*
     - *Their Full Name **and** Date of Birth (mm/dd/yyyy)*
     - *Address (including city, state and zip code)*
   - ☐ *Your Mother's Maiden Name (mother's last name at birth)*

4. **When will I receive my Account, ATM or Debit Card information?**
   Usually within 7-10 business days after your account has been successfully opened.

5. **How can I access my accounts?**
   Once you have money in your account, you can make FREE withdrawals at any Publix ATM or a SFEFCU branch. You can use most any ATM machine but most other ATMs will charge a fee.

6. **What should I do with the Internship Direct Deposit Form in my new account packet that I received in the mail?**
   *Give the form to your lead/champion teacher by **May 31, 2019 or your payroll may be delayed.***

7. **What if I lost my Internship Direct Deposit Form?**
   Go to a Credit Union branch and have the form reprinted, then take it to your lead/champion teacher. You will need to show proper identification at the Credit Union.

8. **Can I use my account before I start my internship?**
   *Yes, you will have access to your account the minute you make a deposit.**

9. **What happens if I miss the account opening deadline?**
   Your paycheck will be delayed until the next scheduled pay day.

10. **Who do I contact if I have questions regarding internship assignments, internship placements or payroll?**
    *Career & Technical Education (CTE) at: **305-693-3005, internship@dadeschools.net** or visit www.dcte.dadeschools.net/parent*

11. **Who do I contact to find out if my account has been opened or for the status of my ATM/Debit card?**
    *South Florida Educational Federal Credit Union at: **305-270-5239**.*

*One of the required identifications (listed above) must be presented when conducting financial transactions and/or adding products to your account.

January 20, 2019

Dear Parent/Guardian:

Your child has been selected to participate in the 2019 Miami-Dade County Public Schools' (M-DCPS) Summer Youth Internship Program. M-DCPS' Department of Career and Technical Education office and the South Florida Educational Federal Credit Union (SFEFCU) have partnered to offer your child the opportunity to open a Credit Union Savings Account. This will enable your child to have their internship compensation (stipend) automatically deposited into their own savings account.

Once your child's Savings Account has been established, he/she may visit any branch listed on the next page to make deposits, withdrawals, or to apply for an ATM card. Your child can also benefit from other Credit Union products and services, including:

- A Student Checking Account (available only after a Savings Account has been opened)*
- FREE ATM or Debit card (free withdrawals available at all Publix and CO-OP locations)
- 24/7 access to their accounts via Online Banking, Bank-by-Phone, eAlerts

We hope that this partnership helps your child achieve his/her savings goals. The Credit Union is a great place for your child to begin his/her financial future because of higher dividends on savings accounts and offer lower loan rates than most of their competitors. The South Florida Educational FCU has been helping educators and their families achieve financial success since 1935, and are proud to provide a dependable financial resource for your children today.

If you have any questions regarding products and services offered at the South Florida Educational FCU, please call them at (305) 270-5250, visit their website at www.sfefcu.org/studentservices or visit one of their seven convenient branch locations in Kendall, Miami Lakes, Downtown Miami, 27th Avenue, Miami Gardens, Homestead, or Palmetto Bay.

Sincerely,

Name of Principal

**For Checking Account guidelines please visit https://www.sfefcu.org/accounts/studentchecking.*

Frequently Asked Questions For Students and Parents

1. **How can I open an account?**
   - You can visit one of our seven branches or apply at your respective school branch.

2. **What do I need to open my account?**
   - **a.** Minimum deposit of $5 (to be paid at first visit to a SFEFCU branch)
   - **b.** Student's Social Security Number
   - **c.** Student's School ID Number
   - **d.** Student's Current Identification
     - Florida Driver's License or Learner's Permit
     - State Identification
     - Passport
     - Resident Alien Card
     - Military ID

3. **Can I have an ATM card?**
   - Yes, once you have made an initial deposit, you may order an ATM card.

4. **Can I use my account before I start my internship?**
   - Yes, you will have access to your account the minute you make a deposit and activate your account.

South Florida Educational Federal Credit Union
Earn "extra credit" with your membership.

OFFICE LOCATIONS & PHONE NUMBERS

MEMBER SERVICE CENTER
305-270-5250

MIAMI GARDENS
18975 NW 2nd Avenue, Miami, FL 33169
305-914-3939

MIAMI LAKES
5890 NW 158th Street, Miami Lakes, FL 33014
305-556-4311

DOWNTOWN MIAMI
1498 NE 2nd Avenue, Miami, FL 33132
305-379-0621

27th AVENUE
2310 SW 27th Avenue, Miami, FL 33145
305-270-6640

KENDALL
7800 SW 117th Avenue, Miami, FL 33183
305-270-5200

PALMETTO BAY
17500 S. Dixie Highway, Miami, FL 33157
305-964-4000

HOMESTEAD
16460 SW 304th Street, Homestead, FL 33033
305-248-8006

OFFICE HOURS:
Miami Gardens / Miami Lakes / 27th Avenue / Kendall / Palmetto Bay / Homestead:
Monday – Thursday: 9 - 5
Friday: 9 - 6 / Saturday: 9 - 1
Downtown Miami: Monday – Friday: 9 - 5

SCHOOL BRANCHES:

SWAMP CU - Barbara Goleman Senior High School
CAVALIER CU - Coral Gables Senior High School
EAGLE'S NEST CU - Southwest Miami Senior High School
EXCALIBUR CU - Miami Sunset High School
BULL'S RUN CU - Miami Northwestern High School
MIGHTY EAGLES CU - William H. Turner Tech High School
GENERALS CU - Miami Jackson High School
BULLDOGS CU - G. Holmes Braddock High School
RED RAIDERS CU - Miami Edison High School
CHARGERS CU - North Miami Beach High School
JAGUARS CU - Miami Lakes Educational Center

www.sfefcu.org

Instructions for Completing TANF SYEP Eligibility / Screening Form

Summer Youth Employment Program

1. Youth's Name – Enter the youth's name as it appear on the social security card.
2. SSN – Enter the youth's SSN #, a copy of the SSN card is required
3. If no SSN was proof of SSN application provided – The SSN application will not be acceptable. If the youth does not have a physical SSN card the parent need to go to the Social Security Administration (SSA) office and apply for a replacement card. It usually takes about 2-3 weeks to receive the replacement card.
4. Is the youth a United Citizen: - The answer is based on the information that was submitted to you from the youth
5. If no, is the youth a qualified non-citizen? - Answer this question If the answer for #4 was no.

Demographic Information

Complete the Demographic Information section of the form based on the documentation that is provided.

Eligibility

If the youth is receiving free / reduced lunch / reduced lunch, Purpose 2 will be yes.

Documentation is needed for each youth that is receiving free / reduced lunch

Privacy Act Statement

The **first** and the **third** statement of the Privacy Act Statement which is pertaining to the youth Social Security Number need to be initialed.

Parent/Guardian Signature and Date need to be complete by the youth parent or guardian.

TANF SYEP ELIGIBILITY/SCREENING

Summer Youth Employment Program			
Youth's Name:			**SSN:**
If no SSN, was proof of SSN application provided?	❑ YES	❑ NO	❑ N/A
Is the youth a United States Citizen?	☐ YES	☐ NO	
If no, is the youth a Qualified Non-Citizen?	❑ YES	❑ NO	❑ N/A

DEMOGRAPHIC INFORMATION			
Family Size:	Date of Birth: / /	Age:	Sex: ❑ M ❑ F
Street address:			
City:	State:	ZIP Code:	
Phone Number: ( )	Alternate Number: ( )		

ELIGIBILITY				
Purpose 1: Assist needy families so that children can be cared for in their homes				❑ Yes ❑ No
Eligibility Criteria:				
❑ In a family receiving Temporary Cash Assistance ❑ Residing in the home of a parent ❑ Residing in the home of a caretaker				
Documentation: Florida Screens Required				
❑ AIHH	❑ AIID	❑ AIIM	❑ ARDT	❑ IQCH
Purpose 2: Reduce the dependency of needy parents by promoting job preparation, work, and marriage				❑ Yes ❑ No
Eligibility Criteria:				
❑ Youth's family income does not exceed 200% of the Federal Poverty Level				
Documentation: Check all that apply				
❑ Tax Returns	❑ Pay Stubs (last 4 weeks)		❑ Employment Verification Form	
❑ Unemployment Benefits	☐ Free/Reduced Lunch		❑ Other: SSI/SSDI, Child Support	

2012 Federal Poverty Level-200%			
Persons In Family/Household	**Poverty Guideline**	**Persons In Family/Household**	**Poverty Guideline**
1	**$22,340**	**5**	**$54,020**
2	**$30,260**	**6**	**$61,940**
3	**$38,180**	**7**	**$69,860**
4	**$46,100**	**8**	**$77,780**
Note: For families/households with more than 8 persons, add $3,960 for each additional person			

PRIVACY ACT STATEMENT

_____**I understand** that I am required by law to provide my social security number(s) or proof that I have applied for a social security number if I do not currently have one to receive TANF funded services. This is mandatory under the Social Security Act, section 1137. The SSN is used to administer the program and associate all services, correspondence and participation with the appropriate individual.

_____**I understand** that if I do not have a SSN and I do not know how to apply for one, that I can request help from the One-Stop Career Center or other program provider.

_____**I understand** that my SSN will be used to associate all records to my identification, including program participation and the receipt of benefits/services.

Parent/Guardian Signature: _____Date: _____

RWB Designee: _____ Phone Number: ( ) _____

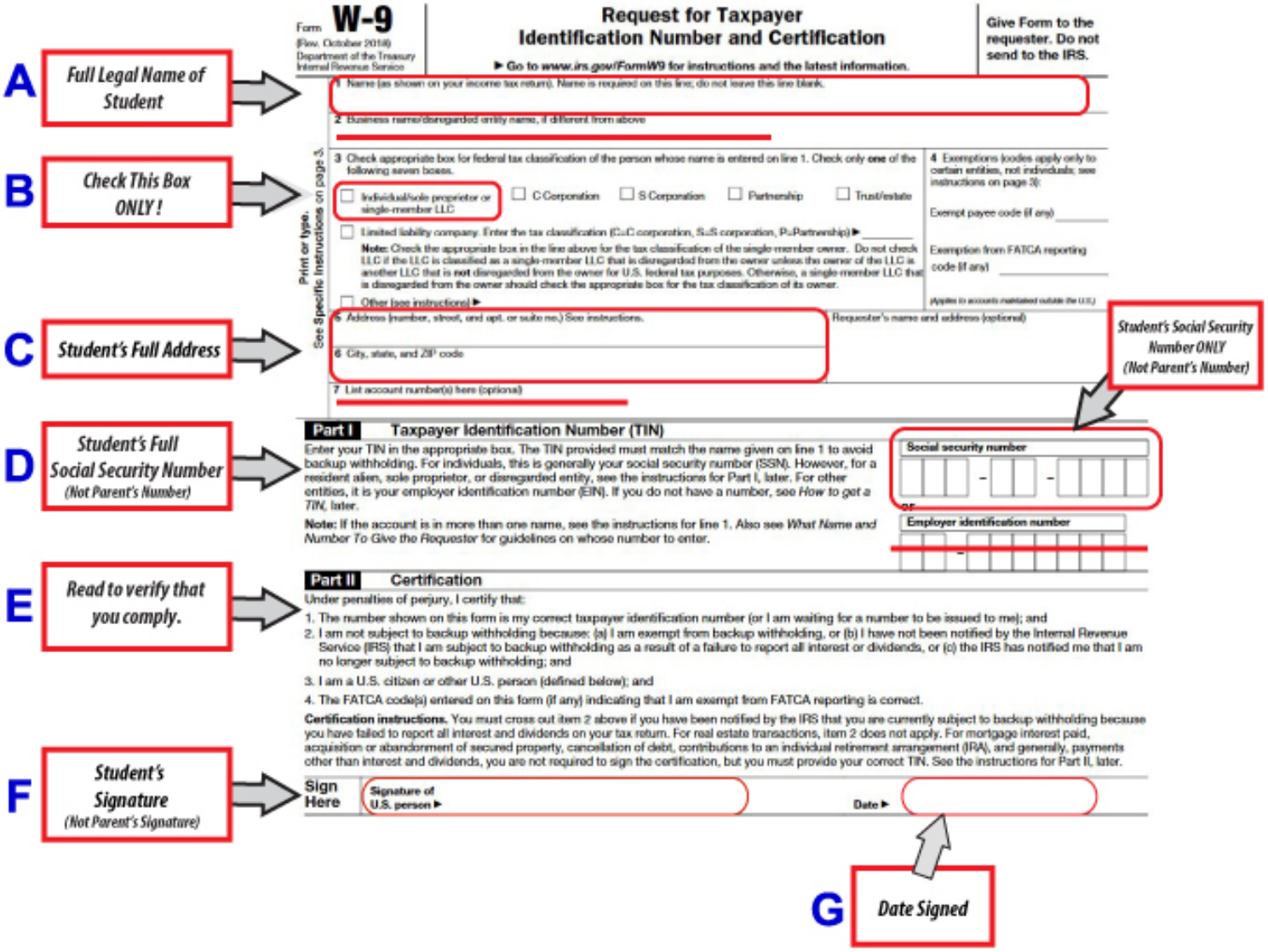
RWB Signature: _____ Date: _____

An equal opportunity employer/program. Auxiliary aids and services are available upon request to individuals with disabilities. All voice telephone numbers on this document may be reached by persons using TTY/TDD equipment via the Florida Relay Service at 711

W-9 FORM INSTRUCTIONS

To download current form, go to: **https://www.irs.gov/pub/irs-pdf/fw9.pdf**

A - Fill out the full legal name of STUDENT (not parent's name)
B - Check the Box marked Individual
C - Fill out complete address of student
D - Fill out full social security number of STUDENT (not parent's number)
E - Read Part III
F - Signature of STUDENT (not parent)
G - Fill out date signed



STUDENT NAME (printed): _____ **STUDENT ID #:** _____

SCHOOL NAME: _____

MIAMI-DADE COUNTY PUBLIC SCHOOLS
Summer Youth Internship Program

Internship Provider, Instructional Supervisor, Student and Parent Responsibilities

Internship programs are planned to develop students academically, economically and socially. There are responsibilities to the school, to the community and to the business sponsors that must be considered when accepting students into these programs.

Internship Provider Responsibilities

The internship provider agrees to place the student intern in his/her business organization for the purpose of providing workplace readiness experience. The internship will be under the supervision of a qualified supervisor. The work will be performed under safe and hazard free conditions. The student will receive the same consideration given employees with regard to safety, health, general working conditions, and other policies and procedures of the business. The internship provider will adhere to all state and federal policies related to nondiscrimination in employment and educational programs or activities with regards to race, gender, color, religion, ethnic or national origin, political beliefs, marital status, age, sexual orientation, social and family background, linguistic preferences or disabilities. I understand that the required dates of attendance will take place during the summer 2018 term and that NO vacation is allowed during this time frame. The internship provider agrees to adopt a background screening process that is consistent with M-DCPS guidelines at a minimum on the person(s) who will be supervising the student. The internship provider understands and agrees that it is subject to all applicable federal and Florida laws and School Board policies relating to the confidentiality of student records.

The Student agrees to comply with all requirements found in the Student Internship Handbook:

1. Adhere to rules and regulations of the business and act in an ethical matter;
2. Provide his/her own transportation to place of internship;
3. Inform the internship provider and the instructional supervisor in the event of illness or emergency that prevents attendance;
4. Be in attendance and punctual on the job and for all specified meetings;
5. Not voluntarily quit/resign a job without previous authorization from the internship provider and the instructional supervisor; and
6. Understand that the instructional supervisor is the recognized authority for making any adjustments or changes in the internship program. This principle applies regardless of whether or not the student obtained his/her own internship position.

The Instructional Supervisor agrees to:

1. Hold a minimum of two conferences with the internship provider to discuss the student's progress;
2. Communicate with internship supervisor to resolve any interference that may occur between the internship program and the company's policies.
3. Counsel the student about the work-based learning experience.

The Parent (Guardian) agrees to:

1. Ensure that their child follows internship provider/school expectations of the program;
2. Support the policy of requiring the student to complete the length of the internship program. Internship providers should not be put in a position of having to accommodate the vacation schedule of their intern's family.
3. Understand that the student is responsible for his/her own transportation;
4. Understand that Miami-Dade County, Miami-Dade County Public Schools (M-DCPS), CareerSource South Florida, Royal Caribbean Cruise Lines, JPMorgan Chase, The Children's Trust and/or the Foundation for New Education Initiatives, Inc. will not be held liable in case of accident/injury on the way to and from internship. Student must obtain M-DCPS Student Accident Insurance to be eligible for the program.

We, the undersigned, agree that we have read and understand the purpose and intent of the Internship Program Responsibilities.

Student Name (print)	Student Signature	Date
Parent Name (print)	Parent Signature	Date
Instructional Supervisor (Print)	Instructional Supervisor Signature	Date
Internship Provider Supervisor (Print)	Internship Provider Supervisor Signature	Date
Lupe Ferran Diaz, Ph.D., Executive Director Department of Career and Technical Education	Signature	Date

SAMPLE ONLY - DO NOT GIVE OUT FOR SIGNATURE

The School Board Attorney's Office approved this agreement as to form and legal sufficiency.

Copy with original signatures will be collected DURING the internship. Must be signed by all parties.

2019 SUMMER YOUTH INTERNSHIP PROGRAM
STUDENT HANDBOOK ACKNOWLEDGEMENT

The 2019 Summer Youth Internship Program is designed to give students real-life experiences in the world of work. During this time, students will take on the roles and responsibilities of a valued member of a business organization. It is important that the student interns understand that dress, punctuality, attendance, and behavior reflects upon themselves and their parents, teachers, school, and peers. Actions speak louder than words and are remembered longer. As young professionals, it is important that the impression left is bright, like a star.

The Internship involves two individuals to oversee the intern; an internship workplace supervisor and a Miami-Dade County Public Schools (M-DCPS) Instructional Supervisor. The M-DCPS Instructional Supervisor's position is to oversee the internship, to visit interns and internship providers, and to assist in a successful internship. This individual may or may not be the intern's lead teacher, but is there to help with the challenges that may arise. Please call or e-mail the M-DCPS Instructional Supervisor if there are any questions or concerns.

This handbook has been developed to help you prepare and successfully complete the 2019 Summer Youth Internship Program. It contains activities, suggestions, and resources to assist in the completion of weekly assignments. It is the intern's responsibility to read this handbook and understand what will be asked of them. If there are any questions about assignments or activities, please discuss them with the M-DCPS Instructional Supervisor.

Enjoy your summer internship experience and remember your supervisors are here to help and support. If there are any questions, problems, concerns, or issues that arise, contact them for input and direction. Remember the 3P's: positive, polite and punctual. Good Luck.

I, _____ understand that it is my responsibility to read this handbook and clarify any items.
PRINT NAME
I further understand that I will be held accountable for all information contained in this handbook.

_____

SIGNATURE DATE SCHOOL

Miami Dade County Public Schools
Department of Career & Technical Education
10151 NW 19th Ave
Miami, FL 33147
Phone 305-693-3030 Fax 305-696-9346
Internship Hotline 305-693-3005

Student will have a copy of this form in the internship course, they will download, sign and give to teacher. Don't have to upload to LiveBinder folder.