

**Internship Form**

To be returned to the Departement

Secretary after Compagny’s and student signature

**🞏 Carrières Sociales 🞏 Hygiène Sécurité Environnement**

**🞏 Génie Civil Construction Durable 🞏 Informatique**

**🞏 Gestion des Entreprises et des Administrations 🞏 Information Communication**

**🞏 Génie Électrique Informatique Industrielle 🞏 Management de la Logistique et des Transports**

**🞏 Génie Mécanique et Productique 🞏 Techniques de Commercialisation**

**Academic year 2022/2023**

Law n°2013-660 of 22nd July 2013, Law n°2014-788 of 10th July 2014. Decree [n°2014-1420 of 27th November 2014.](http://www.legifrance.gouv.fr/affichTexteArticle.do;jsessionid=BAF0EFE6E733DD53016F87E2B4A01AD9.tpdjo15v_3?cidTexte=JORFTEXT000027854364&idArticle=LEGIARTI000027857634&dateTexte=20141021&categorieLien=id#LEGIARTI000027857634)

According to the Education Code Decree, in particular articles D621-56 to 612-60, remuneration is obligatory for internships lasting more than 2 months, whether those 2 months are consecutive or not (2 months = 44 days = 308 hours).

The default amount of the remuneration is set at 15% of the maximum social security hourly rate defined in accordance with Article L.241-3 of the Social Security code, that is to say 25 € from 01/01/2022 (3.90 euros/hour).

These decrees are French National Law so only apply to an internship in France or French territory or an internship abroad under contract in a French company. Remuneration is not compulsory for students following an adult education program.

Annual training hours (according to the current program) **:**

**🞎 B.U.T. 1st year number : weeks**

**🞎 DUT 2nd year number : weeks Placement from : / / 20 to  / / 20**

**🞎 LP number : weeks**

Student Information**:** Student number (Apogée)**: 20 \_ \_ \_ \_ \_ \_**

Surname, First Name: Date of birth : \_ \_ / \_ \_ / \_ \_ \_ \_

Gender: 🞎 Male 🞎 Female

Address:

Home Phone number: Mobile number:

Email:

Social Security: 🞎Student 🞎 non-French 🞎 Other

Health Insurance: 🞎 CPAM 🞎 MSA 🞎 Special Regime 🞎 Other

**IMPORTANT**: Insurance covering civil liability is compulsory, proof of which must be provided with the internship contract.

How was the internship found? 🞎 in reply to an ad 🞎 spontaneous candidature 🞎 personal contact

**Company Information:**

Full Name of Company:

Street:

Town:

Postcode:

Country:

Managing Director / Legal signatory of the internship contract: 🞎 Ms 🞎 Mr Surname: \_\_\_\_\_\_\_\_\_\_\_\_ First name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

APE code: \_ \_ \_ \_ \_ Number of staff: \_\_\_\_\_\_\_\_ (Sector of Activity) : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type of company: 🞎Public Administration 🞎 Association/Charity 🞎 Private company 🞎 State-run company 🞎 Cooperative 🞎 NGO

Department of Internship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Where the trainee will be working, if different to above address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tutor within the Company: 🞎 Ms 🞎 Mr Surname: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_First name: \_\_\_\_\_\_\_\_\_\_\_\_

Tutor’s position within the company: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone number: Email:

Information about the internship: **to be completed by the IUT**

Internship requirements: to adapt to a professional environment (company rules & regulations, company mission statement, health & safety, employee relations) to exploit academic knowledge, to develop professional and interpersonal skills (initiative, team work, autonomy, communication skills), to develop industry specific skills and knowledge

Mentoring responsibilites of IUT tutor: to make contact with the Company tutor (visit, telephone etc), to keep in contact with the student (visit, email etc), to invite the Company tutor to the oral presentation

**IUT Tutor**: 🞎 Ms 🞎 Mr Surname: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tutor’s position within the IUT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone number: Email:

Information about the Internship: **to be completed by the company**

Objective of the Internship:

Main responsibilities & duties (include how the student will be mentored):

Length of the placement: \_\_\_\_\_\_\_\_\_\_\_\_\_ weeks Weekly hours: \_\_\_\_\_\_\_\_\_\_\_\_\_

Internship requires night shifts, work on Sunday or public holidays (detail): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of days of authorised leave / organisation of authorised leave or absence: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Remuneration: \_\_\_\_\_\_\_\_\_\_ (gross monthly) or \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (gross total) or 🞎 without remuneration

Payment : 🞎 bank transfer 🞎 cheque 🞎 cash

Benefits: 🞎 food 🞎 accommodation 🞎 transport from/to work 🞎 work trip expenses 🞎 others (detail) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Head of international office**  **Thierry TABELLION** |  | **Course leader/head of work placement**  (Name & Signature) |  | **Company Representative**  (Name & Signature) |  | **Company Tutor**  (Name & Signature) |  | **Student**  (Name & Signature) |  |