

To be returned to the Departement  
Secretary after Compagny's and stude  
signature

- |  |   |
|--|---|
| <input type="checkbox"/> <b>Carrières Sociales</b><br><input type="checkbox"/> <b>Génie Civil Construction Durable</b><br><input type="checkbox"/> <b>Gestion des Entreprises et des Administrations</b><br><input type="checkbox"/> <b>Génie Électrique Informatique Industrielle</b><br><input type="checkbox"/> <b>Génie Mécanique et Productique</b> | <input type="checkbox"/> <b>Hygiène Sécurité Environnement</b><br><input type="checkbox"/> <b>Informatique</b><br><input type="checkbox"/> <b>Information Communication</b><br><input type="checkbox"/> <b>Management de la Logistique et des Transports</b><br><input type="checkbox"/> <b>Techniques de Commercialisation</b> |
|--|---|

Academic year 2023/2024

Law n°2013-660 of 22nd July 2013, Law n°2014-788 of 10th July 2014. Decree n°2014-1420 of 27<sup>th</sup> November 2014.  
 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 29 € from 01/01/2024 (4.35 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) :

- |   |          |       |                                   |
|---|----------|-------|-----------------------------------|
| <input type="checkbox"/> <b>B.U.T. 1st year</b> | number : | weeks |                                   |
| <input type="checkbox"/> <b>BUT 2nd year</b>    | number : | weeks | Placement from : / / 20 to / / 20 |
| <input type="checkbox"/> <b>BUT 3rd year</b>    | 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 responsibilities 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)