



Sheet intended for the drafting of the agreement
internship in a company



To return to osuc-stages@univ-orleans.fr or to submit to the OSUC secretariat: Office R025

1 - DYEARS RELATING TO 'STUDENT TRAINEE (to be completed by the trainee)

Last name First Name- Telephone- Student number -
Full address (CP City)-
Date of birth- Social Security number- Nationality-
Journey Type of internship Research internship Professional internship

1 - DYEARS RELATING TO THE HOST COMPANY (to be completed by host organization)

Name of the host organization (Social reason)

Represented by (LAST NAME - First name - Position of the signatory of the agreement)

Telephone E-mail-

Full address-

Home Service -

Service address if different -

Name of professional tutor - Function-

Telephone - E-mail-

Other possible contact agreement (LAST NAME - First name - Position)-

Telephone- E-mail-

3 - DINTERNSHIP YEARS (to be completed by the organization)

Start date of the internship- End date of traineeship

Nb of hours / week- Duration / h of the internship

The total duration of the internship deducted from leave and holidays must not exceed 924h

Dates and number of holidays / weekends / public

holidays-Attendance **exceptional** Night Weekend holidays No

Internship subject

Activities entrusted to the intern
(short summary)

Skills to acquire

4 - GRATIFICATION AND TOBENEFITS (to be completed by the organization)

Net gratification- Monthly Hourly

Payment terms -

Benefits granted to the student intern- Accommodation Restoration Transportation Service vehicle

Others (specify)

5 - VALIDATION OF THE SHEET

The professional tutor (1) (Last Name - First Name - Date and Signature)-

I certify that I have the agreement of my Direction for the reception of the intern in the conditions filled in

Telephone - E-mail-

THE teacher-referent of the trainee (1) (Last Name - First Name - Date and Signature)-

I certify have verified and be in agreement with the conditions of the internship and undertake to support the student during his

internship. Telephone - E-mail-

The Student (Last Name - First Name - Date and Signature)-

I certify that I have presented the terms of the internship to my teacher and agree to the conditions of the internship

How to have my agreement established

You have found an internship which corresponds to the training requirements (Dates - Duration - Subject - Level etc...)

- Get in touch with the person in charge of your training in order to check the conformity of the training course and to define together, the referent teacher for your internship (The one who will accompany you throughout the internship and who will regularly approach your professional tutor)
- Complete and have completed **in its entirety** the first page of this document. (Signed by 3 parts)

2 solutions for filing your documents

Any incomplete file submitted will remain pending information, missing documents or signatures

- **Email yourself** all the documents and the form duly completed and fully signed at osuc-stages@univ-orleans.fr
- **Submit to the OSUC secretariat - office R025** the form accompanied by a certificate of civil liability COVERING the entire period of the internship **at the secretariat office R025.**

You need help

Send an email to osuc-stages@univ-orleans.fr