

Internships CSO SUPERVISOR'S STATEMENT OF AGREEMENT

The student indicated below is applying for funding from the Dartmouth Center for Social Impact (DCSI) to support an Internship at your organization. Funding for this program is extremely competitive. Funding decisions are made within a month of the application due date. Submission of this form signifies to DCSI that your agency has agreed to provide the specific volunteer work assignment described below and has designated a specific supervisor to oversee that work. Please indicate if your organization can contribute to the intern's award - financial or in-kind (for example, housing or meals). This Statement of Agreement records the details of funding. All selected DCSI Interns are covered by medical insurance. This agreement is not a legal contract, and is not forwarded to any public agencies. A student's application for DCSI funding will not be considered complete until this form has been completed.

(Organization Name) agrees to take (Intern Name) into the organization and to provide 40				
hours of meaningful service work during at least 8 weeks of the (check one)Fall				
Winter	Spring, or	Summer term, and to supervise this v	vork to the	
degree that at the end of the internship a brief evaluation can be offered by the supervisor.				

_____The offer of this internship is contingent upon award of a DCSI Internship (optional).

List community service tasks of internship: (Interns should devote at least 60% of their time to direct community service, defined as work in which volunteers engage personally with those being served, providing labor that fills an identified community need.)

List activities on which remaining time may be spent: (Activities such as research, advocacy, shadowing, public policy, office support, and event planning may be part of an internship, but are not considered direct service. This work must not constitute more than 40% of the proposed internship.)

Dartmouth Center for Social Impact provides interns with a stipend of up to \$5,000, based on need, to help defray living costs. Host organizations are asked to pay, when possible, a portion of the stipend for the intern. Please indicate the level of stipend you can meet:

- a) _____ Yes, we can fund the amount of \$_____as a stipend.
- b) _____ **No**, we will not be able to fund any portion of the student's stipend.
- c) _____ We can support the intern with the following living accommodations and/or other assistance_____

Date:					
Supervisor's Name:					
Supervisor's Title:					
Supervisor's Signature:					
(*electronic signature accepted)					
Address:					
Phone:	Fax:				
Is this a non-profit organization?					
Does this organization serve an under-resourced community? Yes No					
Is this organization non-partisan?	Yes	No			
Length of project:weeks Ho	ours weekly:_	(40 hours minimum)			
Starting Date:	Ending Date	2:			
<u>Return</u> by deadline date of	to:				
Internships Dartmouth Center for Social Impact, Dartn 6154 South Fairbanks Hall Hanover, NH 03755-3568 Phone: 603-646-3350 / Fax: 603-646-264 Email: service.internships@dartmouth.edu	45				
After return of this signed and completed Statemer Organization, the DPCS Intern, by his/her signature					

understood and accepted:

(DCSI Internship applicant name)

(Date)