**[Your Sanctuary] Sanctuary Internship Agreement**

Intern Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Relationship between [Your Sanctuary] and Intern**

Intern wishes to volunteer for **[Your Sanctuary]** by participating in the **[Your Sanctuary]** internship program. Intern is not an employee of **[Your Sanctuary]** or entitled to compensation for any work or other activities performed for or at **[Your Sanctuary]**. There is no expectation that an internship will lead to employment with **[Your Sanctuary]**.

**Terms of Internship**

The internship begins on \_\_\_\_\_\_\_\_\_\_\_\_\_ and ends on \_\_\_\_\_\_\_\_\_\_\_\_\_\_ at the **[Your Sanctuary]** location, **[Your Sanctuary’s Address]** in the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ department. Internship terms may be renewed pending a review by the department leads and the intern’s interest.

**Internship Duties and Volunteer Work Schedule**

There is an expectation that the intern will volunteer \_\_\_ hours per week during this **[Part or Full]**-time internship program, with a final schedule to be determined between the intern and their respective department lead(s). The volunteer duties and work schedule will vary depending on the department the intern is working in while at **[Your Sanctuary]**. The volunteer work may be physically demanding. Weekends and holidays may be required.

**Vegan Living**

Out of respect for the animals and the **[Your Sanctuary]** mission, all staff and interns are required to be vegan while on the sanctuary premises, or while representing the sanctuary out in the community. Vegan living includes diet (no meat, dairy products, eggs, honey, or other animal byproducts), personal care items (cruelty-free and no animal byproducts), and clothing (no leather, silk, or wool).

**Rules**

Intern agrees to comply with all rules **[Your Sanctuary]** may have or hereafter establish. **[Your Sanctuary]** will provide intern with rules through written or verbal communications. Violation of these rules may lead to immediate termination of Intern’s participation in the internship program.

**Alcohol, Drug and Smoking Policy**

There is a strict no alcohol, drug and smoking policy when on the **[Your Sanctuary]** premises. Because the **[Your Sanctuary]** property is covered in dry grasses, fire safety is a large concern and one reason for why smoking is prohibited.

**Confidentiality**

Intern acknowledges that during the course of the internship with **[Your Sanctuary]**, Intern may be furnished or have access to confidential and/or proprietary information regarding the affairs of **[Your Sanctuary]**. Intern acknowledges that all confidential and/or proprietary information regarding **[Your Sanctuary]** shall only be used for the intended and/or contemplated business-related purpose(s) and such shall not be used for any other purpose(s) or disclosed, in any matter whatsoever, to any third party or parties including any unauthorized **[Your Sanctuary]** employee(s) or volunteer(s). Any misuse or disclosure of confidential and/or proprietary information will be considered as grounds for termination of participation in **[Your Sanctuary]**’s Internship program.

**Messaging**

**[Your Sanctuary]** recognizes that there are a variety of ways to communicate a mission or message, and has made careful decisions about how the organization’s mission is shared with its audience. Intern will receive guidance and instruction throughout the internship program on **[Your Sanctuary]**’s messaging style choices and requirements. While fulfilling the internship terms, Intern agrees to maintain the standards set forth by **[Your Sanctuary]** relating to all **[Your Sanctuary]** messaging styles and content when serving as a representative of the sanctuary on sanctuary premises or offsite at a sanctuary-related event. Intern also agrees to communicate clearly that, in the event a personal opinion is shared with a member of the community, this opinion is solely that of the Intern, and is not representative of **[Your Sanctuary]** in any way. If Intern is unsure of how to handle messaging on behalf of **[Your Sanctuary]** in any situation, Intern agrees to consult with their supervising staff member.

**Companion Animals**

Animals who are not **[Your Sanctuary]** residents are not permitted to come on the **[Your Sanctuary]** property, [with the exception of staff dogs].

**Housing and Transportation**

As of now, there is no housing on the **[Your Sanctuary]** premises provided for Interns. Interns must commute from home and provide their own transportation to do so.

**Photo and Video**

Intern must ask **[Your Sanctuary]** staff before sharing or posting videos and photos of residents that are not already part of public storytelling or sharing. Some of the new residents may not be ready to show their faces to the public just yet, or their story might be tied into a planned announcement.

**Insurance**

**[Your Sanctuary]** does not supply medical insurance or workers compensation insurance covering Intern.

**Compensation**

Intern understands that they are entering into an unpaid volunteer agreement, and that no compensation will be furnished for volunteer work served during the internship. Intern further acknowledges that nothing contained in their application nor conveyed in any interview or during the internship terms is intended to create an employment contract between the Intern and **[Your Sanctuary]**.

**Intern represents that they have read this agreement and fully understand and commit to it. Intern further represents that they are of legal age, 18 years old or older.**

# By signing below, Intern agrees to the terms of this Agreement in full.

# SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **INTERN EMERGENCY CONTACT INFORMATION**Please provide the name and number of at least one person that we can contact on your behalf in case of emergency**Name:****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Relationship with this person:****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Phone number:****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Name:****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Relationship to this person:****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Phone number:****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

 **Please list your current address and phone number:**

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please list any allergies you may have and if you require**

**medication to treat an allergic reaction should you have**

**one during your internship:**

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**Please list any other medical conditions that would require**

**emergency medical treatment (such as seizures):**

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