RECEIVED _____

Maui Community College

University of Hawai`i System

MEMORANDUM OF UNDERSTANDING –FORM 1
COUNTY OF MAUI COOPERATIVE EDUCATION PROGRAM
2007 - 2008 _____
(semester)

SUMMARY OF IMPORTANT RESPONSIBILITIES OF PROGRAM PARTICIPANTS - INTERN, COUNTY INTERNSHIP SUPERVISOR, COOPERATIVE EDUCATION INSTRUCTOR.

1. The intern shall abide by the regulations and policies of the County of Maui and the College.
2. The intern shall communicate regularly with the internship supervisor and Cooperative Education program primary instructor to ensure completion of program requirements.
3. The County of Maui internship supervisor shall provide the intern with experience related to the projects listed in the intern's project activities description and the intern's career / academic goals.
4. The County of Maui internship supervisor shall conform to all applicable Federal and State regulations regarding non-discrimination and affirmative action as defined in the University of Hawaii policy.
5. The County of Maui internship supervisor shall assist with the necessary documentation required for this special partnership with the County of Maui.
6. The Co-op instructor shall provide related academic instruction, consultation, and advisory assistance to all involved in this program.

Please review Document 1 [Cooperative Education Program Information for County Internship Supervisors] if more specific program information is required. We understand and agree to the conditions for participation in the County Co-op program.

Note: This is not a legal contract. It is a memorandum of understanding for all participants. It may be revised or terminated with the discussion, understanding, and agreement of all parties.

_____

INTERN'S SIGNATURE PRINT NAME DATE

_____

INTERNSHIP SUPERVISOR'S SIGNATURE PRINT NAME DATE

_____

TITLE OF INTERNSHIP SUPERVISOR COUNTY DEPARTMENT

_____

MCC CO-OP INSTRUCTOR'S SIGNATURE DATE

Due 5 working days after commencing the internship experience.

Maui Community College does not discriminate on the basis of race, sex, age, religion, color, national origin, ancestry, disability, marital status, arrest and court records, sexual orientation, or status as a covered veteran.

(FORM 1 County- Rev 12/07)