

**FORMAL INTERNSHIP PROJECT AGREEMENT**

B E T W E E N:

Cranfield University, Cranfield, Bedfordshire, MK43 0AL  
(hereinafter referred to as "Cranfield University")

and

.....  
(hereinafter referred to as the "Internship Project Provider")

FOR THE SPONSORSHIP OF A MASTERS IN MANAGEMENT INTERNSHIP PROJECT.

Internship Project Provider Supervisor to Student: .....

Office Address where Internship Project will take place: .....

Office Hours for Student: .....

Student: .....

1. TITLE OF INTERNSHIP PROJECT:
2. DURATION: The Internship Project will begin on..... and will end on.....  
Cranfield University and the Internship Project Provider will support the Student's work until the end of the Internship Project.
3. DELIVERABLES: The Student will present a written report to the examiners of Cranfield University. The Student will deliver to the Internship Project Provider a final written report by the end of the Internship. There will be one visit to the Internship Project Provider's premises during the Internship Project, at which time an appointed member of the Cranfield University Masters In Management Internship team will speak with both the Internship Project Provider Supervisor and the Student to gain feedback on the progress of the Student.
4. WORKING CONDITIONS: The Internship Project forms an integral part of the Masters in Management programme. The work will be carried out at the premises of the Internship Project Provider, and at other locations as appropriate. Whilst on the Internship Project Provider's premises the Student will be treated for insurance purposes and for the purposes of Health and Safety as if an employee of the Internship Project Provider. The Project Provider will provide an induction training programme, which will include a task-appropriate Health & Safety briefing for the student and make available the Health & Safety policy, and appropriate procedures and risk assessments.
5. LIMITATION OF LIABILITY: Cranfield University shall use its reasonable endeavours to ensure accuracy and completeness of information supplied as a result of the Internship Project, but Cranfield University cannot accept any liability for any errors, omissions or other defects arising from the work or for any direct, indirect or consequential loss (including without limitation, for loss of profits, business revenue or anticipated savings) suffered by the Internship Project Provider or its customers as a result of any matter, and as such the Internship Project Provider agrees it is entirely responsible for any use to which it puts such information.
6. COSTS: The Internship Project Provider will pay .....plus VAT at the prevailing rate (if applicable), to Cranfield University, in respect of the Internship Project.

7. **PAYMENT PROCESS:** Cranfield University will raise an invoice on the commencement of the Internship for the duration of the Internship Project. Payment will be due 30 days from date of invoice unless otherwise specified.
  
8. **PROJECT PROVIDER:** The Internship Project Provider will be responsible for the Student directly during the term of the Internship Project and as such will be responsible for complying with all relevant laws of the jurisdiction in which the Internship Project is to take place. The Internship Project Provider will pay expenses of £..... plus VAT at the prevailing rate (if applicable). For Internship Projects taking place outside the UK the Internship Project Provider will make travel arrangements direct with the Student as well as arranging any necessary visa requirements. Details of travel arrangements should be emailed to [sharron.jenkins@cranfield.ac.uk](mailto:sharron.jenkins@cranfield.ac.uk).

For and on behalf of

For and on behalf of

**CRANFIELD UNIVERISTY**

.....

Signed: .....

Signed: .....

Name: .....

Name: .....

Date: .....

Date:.....

**FOR THE STUDENT:**

I, ....., understand that signing this Agreement indicates my commitment to undertaking the above detailed Internship Project and understand that I may not withdraw from the Internship Project once I am committed to the Internship Project Provider.

I confirm I will discuss any actual or potential changes or problems surrounding the Internship Project with my Academic Supervisor as soon as any issues become apparent and have discussed those issues with the Internship Project Provider. I fully understand my assigned responsibilities and I agree to work the hours required. I further undertake to comply with the policies of Cranfield University and those of the Internship Project Provider.

Signed: .....

Date: .....