

## INTERNSHIP & COOPERATIVE STUDENT WAIVER

I, \_\_\_\_\_ (STUDENT), wish to participate in an internship or cooperative learning arrangement with \_\_\_\_\_ (EMPLOYER), to begin on or around \_\_\_\_\_ (DATE).

In return for my participation, I the student, hereby AGREE AND ACKNOWLEDGE as follows:

1. I understand and acknowledge that EMPLOYER shall be solely responsible for the terms and conditions of my internship/cooperative learning experience. I understand that my placement with EMPLOYER does not create an employment relationship between me and Hawai'i Pacific University, its related entities, agents, directors, advisors,  
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