2020 FIU Summer Research Internship Program (SRI)

Parental Consent Form

Please read this 2-page form carefully and initial & sign where applicable.

Dear FIU SRI Program Staff,

My son/daughter __________________________, Student ID# ______________, is volunteering this summer of 2020 for a **minimum of 20 hours per week for eight weeks** (June 15th – August 7th) in a research facility overseen by a designated mentor who works as a faculty member at Florida International University. I understand that the FIU SRI Program will document hours served this summer and that they will count as community service hours towards graduation; this is an unpaid internship. Please initial _______

I/We understand that **no** transportation to the FIU campuses will be provided and that our son/daughter is willing and able to work at the specified designated times as agreed to between their research mentor and themselves. They will fill out the volunteer forms as required by FIU and will complete all safety coursework prior to their internship start date by the deadline of April 13. Please initial _______

I/We understand our son/daughter has expressed a specific research interest and will meet with various FIU faculties to be interviewed by them and hopefully obtain a summer position within their research facility. We understand that in order to achieve success in this program, it is imperative to consistently spend time in the laboratory, attend program professional development workshops and intern meetings. Interns will not receive a certificate of completion with their certified hours if they do not attend the orientation, the weekly Friday workshops and the mini-symposium. Please initial _______

We will take no more than 1 week of vacation during the internship if **authorized by the research mentor**, and will not schedule vacation during the last 2 weeks of the internship program (July 27-August 7) nor during Orientation on June 15th. Please do not apply for this internship if you are unable to attend orientation on June 15 or the mini-symposium on August 7, 9am – 4pm. By signing this form, we agree to these attendance guidelines and to our child’s participation. Please initial _______

We will ensure that our child is punctual when reporting to their respective lab and will put forth maximum effort when serving their hours. Please initial _______

Students participating in this program are periodically surveyed for feedback on the program activities. No identifying information is ever linked to their feedback. We aim to continuously improve our service to the students. Please initial your consent for your child to participate in surveys/questionnaires regarding the program. Please initial _______

FIU Summer Research Internship Coordinator: Amy Reid | sri@fiu.edu | 305.348.6662
• We often take pictures during our workshops and end of program symposium. Please initial your consent for your child’s picture to be included in FIU program-related brochures, website, and Instagram/Facebook pages. 
  Please initial __________

• The SRI Program Staff strives to ensure that each student participant has an enriching summer experience, and we encourage students to communicate with us about their experiences both good and bad. Knowing that some students are less inclined to speak up, if you are aware that your child (or you) is ever dissatisfied with any element of the program, you are encouraged to contact Program Coordinator, Amy Reid to discuss any issue they may be having. We are here for YOU! Please initial __________

Sincerely Yours,

  Parent/Guardian Name (Printed) ______________________________ Date: ________

  Parent/Guardian Name (Signature) ________________________________

  Student Name (Printed) ______________________________ Date: ________

  Student Name (Signature) ________________________________