



PARENT'S CLEARANCE AND WAIVER FORM

This is to certify that I am allowing **Student's Name** to go on an internship for 12 weeks from _____ to _____ at **Company Name** in partial fulfillment of the requirements for the degree in Bachelor of Science in Applied Corporate Management.

I also allow **Student's Name** to go on fieldwork if the job assigned requires such.

It is understood that **Student's Name** will follow the policies and guidelines set by the school, and abide by the rules and regulations that may be imposed by the company's supervisor/staff-in-charge for her welfare and safety.

I fully agree to waive any responsibility on the part of De La Salle University, Inc., **Company Name**, and the supervisor/staff-in-charge in case of any untoward incident that may happen to **Student's Name** in the duration of the internship.

Signature ¹	
Name of Signatory	
Relationship of Signatory to Intern ²	
Date Signed ³	

¹ The signature/s in this document must match the signatures of the intern's parents on file.

² In the event that a parent cannot sign the waiver form, it must be signed by the legitimate guardian, as evidenced by the letter of guardianship on file.

³ This document must be dated, signed and submitted within the first week of the internship. One copy shall be given to the HR department of the partner company while the other copy to the ACM Internship Coordinator