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### **Acknowledgement Form**

#### **NO GUARANTEED PLACEMENT STATEMENT**

I hereby understand that my participation in the St. Louis Internship Program (SLIP) is voluntary and I am not obligated by this statement to remain in the Program for a specified period of time. I, furthermore, understand that I am not guaranteed an internship placement. By signing this statement, I acknowledge that I am participating in the Program with full knowledge that there are only a limited number of internships available – the number of students seeking internships may limit a student's placement potential.

Student Name (please print) \_\_\_\_\_

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

*I hereby acknowledge that I have read and understand the terms of this statement for the above named student.*

Parent/Guardian Name (please print) \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

#### **PHOTO RELEASE STATEMENT**

I hereby grant to the St. Louis Internship Program (SLIP) the right to reproduce, use, exhibit, display, broadcast, distribute and create derivative works of SLIP related photographs or videotaped images of the undersigned student for use in connection with the activities of SLIP or for promoting, publicizing or explaining the Program or its activities or its participating employers. This release includes, without limitation, the right to publish such images in SLIP's newsletter, flyers, brochures, alumni publications, website, and public relations/promotional materials. These images may appear in any of the wide variety of formats and media now available to SLIP and that may be available in the future, including but not limited to print, broadcast, videotape, CD-ROM and electronic/online media.

All photos taken are without compensation to me (the undersigned). All electronic or non-electronic negatives, positives, and prints are owned by SLIP.

Student Name (please print) \_\_\_\_\_

*I hereby acknowledge that I have read and understand the terms of this release for the above named minor.*

Parent/Guardian Name (please print) \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Witnessed by \_\_\_\_\_