



**SMD Unpaid Academic Internship and Shadowing Program**  
*Parental Consent Form for Interns Under 18*

*For interns and shadows under 18 years of age, the Parental Consent Form must be submitted in conjunction with the Application Form and the Supervisor's Training Compliance Form.*

**Parental Consent Form – please do not make any changes to this form**

SMD Contact Information (to be completed by the department)	
Room Assignment of Intern	
Room Phone of Intern	
Dept. Administrator Name	
Dept. Administrator Email	
Dept. Administrator Phone	
Internship Program Sponsor	585-273-1619
University of Rochester Security	585-275-3333
Applicant Information	
Applicant Last Name, First Name	
Age	
Gender	
Parent/Guardian Information	
Name	
Phone Number	
Alternate Phone Number	
Relationship	
Emergency Contact Information	
Contact Name	
Primary Phone Number	
Alternate Phone Number (required)	
Relationship	



In case of emergency, the above-named Emergency Contact will be notified via telephone. One attempt will be made to reach the Emergency Contact at each of the two phone numbers listed above. In the event that the Emergency Contact is not reached in person, messages will be left at each of the two Emergency Contact phone numbers listed above.

I have received a copy of this form with the SMD Contact Information section complete, and agree to allow my child to complete an internship with the University of Rochester School of Medicine and Dentistry. Please return one signed form to the Department Administrator and also retain a copy for your records.

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Signature of Parent or Legal Guardian

Date

### ***Rules for Program Participants***

1. The possession or use of alcohol and other drugs, fireworks, guns and other weapons is prohibited.
2. Participants may not leave university property or the program without permission of the Program Sponsor.
3. No violence by anyone involved with the internship, including sexual abuse or harassment, will be tolerated. Hazing is prohibited. Bullying, including verbal, physical, and cyber bullying, are prohibited.
4. No use of tobacco products.
5. Misuse, damage or theft of property is prohibited. Charges will be assessed against those participants who are responsible for damage, theft or misuse of university property.
6. Participants must follow all safety rules in accordance with university standards and/or as defined by the department administrator.
7. Use of cameras, imaging, and digital devices is prohibited where privacy is expected, such as showers, locker rooms and restrooms.

Violation of any of the above rules may result in disciplinary action, up to and including termination of the internship/shadowing experience. Discipline imposed is at the complete discretion of the supervising faculty member (SMD Advisor).