

## **Application for UNDP Internship Programme**

(Internship Disclaimer Form)

1.							
2.							
3.	Area of stud	dy					
4.	Degree exp	pected:	Masters	Doctorate	Other		
5.	Date degre	ee will be grante	ed (Day/Month/Year)				
6.	Briefly explain your reasons for applying to the UNDP Internship Programme.						
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7.	Briefly describe your specific learning objectives and how you expect to achieve them through internship with UNDP Belize.						
8.	Paguastad	dates for Intern	nehin				
Ο.	(UNDP only	Requested dates for Internship  UNDP only accepts interns for a minimum of 6 weeks and a maximum of 6 nonths) From:					
9.	Preferred hours for Internship {please check one}						
	a. Full-tin	ne (40 hours pe	er week)				
	b. Part-time (please specify the hours requested and why below):						

10. Statement of understanding of the conditions of the Internship

I understand that, should I be accepted as an intern in UNDP, the following conditions will apply:

- a) Status: Although not considered a staff member of UNDP, I shall be subject to the authority of the Administrator and the authority delegated by him to the Heads of Bureau and Offices. I understand that I am not entitled to the privileges and immunities accorded by member states to UNDP, its officials and staff members.
- b) Financial Support: I shall not be paid by UNDP and must make my own arrangements for living expenses. TraveI costs to and from the duty station and living accommodation are also my own responsibility or those of the sponsoring institution.



c) Medical Health and Life Coverage: UNDP accepts no responsibility for costs or fatality arising from illness or accidents incurred during the internship; therefore, I must carry adequate and regular medical and life insurance. I will be covered by the following health and life insurance during the internship period (your application will not be processed unless you provide photocopies of your medical insurance and life insurance card or policy).

Medical:	
Life:	
	obtaining necessary passport and visas when required. UNDP f an individual as an intern and the conditions governing the
information that I collect or am exposed to	ormation: As an intern, I will respect the confidentiality of at UNDP. No reports or papers may be published based on e explicit written authorization of the Head of Office.
	ship Programme is not connected with employment and there pply for posts advertised internally to UNDP staff during the
Signed:	_
Date:	Name:
that this internship forms an integral part of	t is a graduate or post-graduate student at our university and his/her studies. The proposed internship has been discussed he for should any issues arise during the internship.  Date:
Name:	
Position:	
University:	
Contact number:	
Approved by UNDP Belize:	
Signed:	Date:
Name:	_
Position:	_