

2019 EMPLOYER APPLICATION
Kansas City RIMS – Student Intern Program
(Please attach additional sheets, if necessary)

Employer/Firm: Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone: _____ Fax: _____
 Email Address: _____

Student Mentor: _____ Position: _____

Describe work assignments: _____

Describe student's learning opportunities/benefits: _____

Expected time frame of internship: _____

Type of student desired: ☐ Risk Management & Insurance ☐ Loss Control
 ☐ Fire Protection ☐ Actuarial Science

Other comments: _____

Please return by November 30, 2018 to: David Fromm
 American Safety Management, Inc.
 4300 Shawnee Mission Parkway
 Fairway, KS 66205
 913-676-9241
 dfromm@american-safety.com

By submitting this application, employer agrees to pay out the entire \$5,000 grant to the intern in the form of gross wages. This amounts to \$625 per week or \$15.625 per hour, assuming an 8-hour day for 8 weeks. Employer should withhold and remit federal, state, and local income taxes as well as the intern's employment taxes as required by law. Employer will issue a W-2 to the intern at year-end. Employer is responsible for paying its share of the employment taxes as required by law and any other expenses associated with the internship this summer. **Employer will refund to RIMS any amount less than \$5,000 gross earnings paid to the intern.**

