**Sample Unified School District**

**Internship Program**

**Insurance Letter Example**

**Re: Student participation in Internship Program**

Dear Business Partner:

High school students who attend the Blank Unified School District are under the same insurance coverage at your location as they are at school as long as the students are not being paid. We consider your workplace to be an extension of the classroom.

While students are covered with liability insurance, their only health insurance is that which their family carries. All students have been apprised of this situation.

Please contact me if you have any concerns.

Sincerely,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Official Signature Chief Financial Officer

Phone Number

Email address