

Form No	ICC/06/INT/ICF/2011
Revision	03
Form Title	Internship Agreement



# **INTERNSHIP AGREEMENT**

### A. Student Personal Details

Full Name	:	Fauzul Azkia
Study Program	:	Informatics
Student ID	:	001201900029
Concentration	:	
Mobile Phone Number	:	+6285270473206
Current Address	:	Lubok Batee
Email Address	:	fauzulazkia2002@gmail.com, fauzul.azkia@student.president.ac.id
Home Number	:	+6285270473206

## **B.** Organization Information

Organization/Company's Name	:	PT. Niramas Utama (INACO)
Type of Industry	:	Food & Beverages Industry
Office Phone Number	:	62218807222
Fax Number	:	62218806966
Address	:	Jl. Raya Bekasi Tambun Km 39,5
Website Address	:	inacofood.com
Country Representative	:	Indonesia

## C. Internship Coordinator

Please state the contact person who is responsible for coordinating internship program in the organization/company that hires the intern.

Name	:	Aditya Welly Andi
Department	:	HCM
Position	:	HC Analytic Staff
Office Phone Number	:	085155222542
Mobile Phone Number	:	085155222542
Email Address	:	aditya.welly@inacofood.com



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#### **D. Internship Placement**

:	HCM
:	8 Hour/Day
:	26 Weeks
:	2022-09-26
:	2023-03-24
:	Aldo Omar Dharma Setiawan
:	HC Senior Manager
:	085155222542
:	aditya.welly@inacofood.com
	:

#### **E.** Internship Entitlement

- Meal Allowance
- BPJS Employment

This form is the agreement made among the three parties, which are the institution, intern, and President University for the internship cooperation during the specified period. By signing this form, each party agrees on the terms and conditions which may affect the internship as stipulated by the institution and/or President University. Any information obtained as the result of the internship shall be regarded as confidential which can only be issue to the public upon the consent and acknowledgement from the respective institution and/or President University.

On-Site Supervisor	Intern	
Signed and duly stamped		
Name : Aldo Omar Dharma Setiawan	Name : Fauzul Azkia	
Date :	Date :	