

**DEPARTMENT OF LABOR AND EMPLOYMENT
GOVERNMENT INTERNSHIP PROGRAM
(DOLE-GIP)**

INTERNSHIP AGREEMENT

THIS AGREEMENT is made by and between **the Department of Labor and Employment** as represented by **Regional Director IMELDA E. ROMANILLOS, CESO IV** of the DOLE Regional Office No. CAR with office address at CABINET HILL, BAGUIO CITY.

-and-

Name Of Intern	Postal Address	Effective Start Date	Effective End Date:	Office And Place Of Assignment	Work Contact Person:
					TEDDY A. SY
					TEDDY A. SY
					TEDDY A. SY

WITNESSETH:

1. This Agreement shall govern the relationship of the Intern and the Government Office where he/she will be assigned and does not create any employer-employee relationship between the DOLE and the Intern, and will not be accredited as government services for any purpose/s;
2. That the duration of this Agreement shall be for a minimum of (3) months to a maximum period of six (6) months computed from the date that the Intern reported for work in his/her office of assignment, provided that:
 - a) Former GIP beneficiaries may be readmitted for a minimum of three months (3) months upon recommendation of the partner institution, whether local or national, but in no case shall the accumulated period exceed one year; Provided further, that they will be designated to acquire additional competencies that would merit a potential position, whether contractual, casual or permanent in the government services; and
 - b) That such recommendation contains the (a) latest performance rating or evaluation of the intern; (b) Needed skills of the intern for enhancement; and (c) the intent to hire or absorb the GIP as a contractual, temporary, or regular employee.
3. For the purpose of computation, each month shall be equivalent to twenty-two (22) workdays exclusive of special non-working holidays. In case there are non-working holidays within the duration of the GIP agreement, the period may extend beyond the end date to utilize the allocated budget for twenty-two (22) workdays a month.
4. That in case of pre-termination of the agreement by the intern, he/she shall inform/notify the GIP Partner Agency where the internship is rendered through his/her immediate Supervisor, and report to the DOLE-CAR the intention of ending this Agreement at an earlier date.
5. That the internship agreement may be terminated for just cause under the following circumstances:

- a. gross misconduct or violation of organization's rules and regulations;
 - b. unauthorized absences of more than 3 days or habitual tardiness of ten (10) times a month;
 - c. breach of confidentiality or ethical standards
 - d. any other actions that severely impact the organization's operations or reputation
6. That the DOLE-CAR shall facilitate the enrolment of the Intern and pay the one-time GSIS premium in the amount prescribed by the GSIS before the Intern reports for work while this Agreement is in effect, or during the period of internship.
 7. That the Intern shall be entitled to receive an allowance/stipend from DOLE, equivalent to the highest prevailing regional minimum wage where the internship agreement shall be enforced, payment of wages shall be processed upon submission of the intern of duly signed DTR with accomplishment report to the designated supervisor or agency representative on or before the 16th of the month for the first half and on or before the 1st of the following month for the second half based on the Intern's actual attendance, and likewise, absences, tardiness or under time incurred shall be deducted accordingly; failure to submit on time by the intern may result in delays of stipend processing and other administrative actions as deemed necessary by the agency; and
 8. **Confidentiality:** The Intern must maintain confidentiality, when and where appropriate, during and after the internship, of all the data and information where such information is not within the public domain and is indicated or understood to be confidential.

IN WITNESS WHEREOF, both parties have hereunto set their hands this ____ day of _____ 2026, at Baguio City

Signed: Intern/s

NAMES	SIGNATURE	DATES

By the authority of the Regional Director

Certified Fund Available:

IMELDA E. ROMANILLOS, CESO IV

ATTY. OLIVIA O. OBRERO-SAMSON
Asst. Regional Director

MAUREEN P. PIDAL
Accountant III

Date: _____

Date: _____

ACKNOWLEDGEMENT

REPUBLIC OF THE PHILIPPINES)
_____) S. S.

BEFORE ME, a Notary Public for and in the above jurisdiction personally appeared the following:

	NAMES	IDENTIFICATION CARD	DATE/PLACE
1	ATTY. OLIVIA O. OBRERO-SAMSON	UMID ID: 000-5052-5744-2	CAVITE CITY
2			
3			

Known to me to be the same persons who executed the foregoing instrument and acknowledged to me that the same is their own free will and voluntary act and deed.

This instrument consists of three (3) pages including this page wherein this Acknowledgement is written and is signed by the parties and their instrumental witnesses on each and every page hereof.

WITNESS MY HAND AND SEAL, this _____ day of _____, 2026 at Baguio City.

NOTARY PUBLIC

Doc. No. ____;
Page No. ____;
Book No. ____;
Series of 2026