EXHIBIT B

HEALTH CENTER EMPLOYEES

The parties understand and agree that a Student training under this Agreement, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (the “Student Employee”), is an employee of *CHRISTUS Good Shepherd Health System*. When the Student Employee is serving as a Student intern at the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_site, located at\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, the Student Employee will solely be training under this Agreement and will not be treated, nor hold herself out, as an employee of *CHRISTUS Good Shepherd Health System*. As a Student, pursuant to Section 15 of this Agreement, the Student Employee will not be entitled to any occupational injury benefits while serving as an intern at the clinic nor will *CHRISTUS Good Shepherd Health System* compensate the Student Employee for his/her time.

The parties understand and agree that the Student Employee’s Student internship activities are not within the course or scope of her regular employment. Internship activities will: (a) be performed outside of the Student’s normal working hours, (b) be separate from the Student’s duties and responsibilities as an employee; and (c) not involve the same or similar type of services the Student performs as an employee of Health Center.

Before commencing her Student internship, the Student Employee, her hospital supervisor, and her clinic internship liaison shall sign Exhibit B-1 indicating their agreement with the terms of this arrangement.

EXHIBIT B-1

Employee Intern Agreement

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, understand, acknowledge and agree that:

1. *CHRISTUS Good Shepherd Health System* is offering this internship primarily for my benefit and educational training.
2. My participation in the internship will have no impact on the terms and conditions of my employment with *CHRISTUS Good Shepherd Health System*. This internship is completely voluntary on my part and is neither encouraged nor discouraged by my employer.
3. My internship may be terminated at any time, with or without cause. I may withdraw from participation in the internship at any time, and my withdrawal will not affect my employment.
4. I am not entitled to wages, other compensation, or employee benefits for the time spent on internship activities.
5. My internship activities are not within the course or scope of my regular employment. Internship activities will: (a) be performed outside of my normal working hours, (b) be separate from my duties and responsibilities as an employee; and (c) not involve the same or similar type of services that I perform as an employee.
6. I will not be treated, nor shall hold myself out as, an employee while I am performing services as a Student intern.
7. If for any reason I perform employee work during time scheduled for internship activities, I will notify my supervisor immediately so that I can receive compensation for all work performed.

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

Student Employee Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Employee’s Supervisor Date

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

CHRISTUS Internship Liaison Date