PUSD CTE Work Based Learning Program



2019-2020 Student Intern Packet

Intern Name:

THIS PACKET MUST REMAIN TOGETHER.

YOU ARE RESPONSIBLE TO RETURN THE COMPLETED PACKET WITH APPROPRIATE SIGNATURES BY THE END OF WEEK ONE.

Peoria Unified School District does not discriminate on the basis of race, color, national origin, sex, age, or disability in admission to its programs, services, or activities and provides equal access to the Boy Scouts and other designated youth groups. The Peoria Unified School District's Career and Technical Education (CTE) department does not discriminate in enrollment or access to any of the CTE programs available, such as Business, Marketing & Management, Communication & Information Systems, Environmental & Agriculture Systems, Health Services, Human Services & Resources, and Industrial, Manufacturing & Engineering Systems. For more information on program prerequisites, please see the Course Description Guide here. The lack of English language skills shall not be a barrier to admission or participation in the district's activities and programs. The Peoria Unified School District also does not discriminate in its hiring or employment practices. The following person has been designated to handle inquiries regarding the nondiscrimination policies: Holly Harper

Section 504/ADA Title II Coordinator 6330 W. Thunderbird Road, Glendale, Arizona 85306 623-486-6068





~ Course Description ~

The PUSD CTE Professional Internship Program is an in-depth, work based learning program with **135** hours of experience in a career area of interest. The course is 18 weeks in length and is worth one credit. Each student will receive in-class projects and two mentor evaluations during the semester that will reflect their grade and credit will be given upon completion of the course with the course assessment. It is recommended that each student bring a one inch 3-ring binder with clear front cover to the first day of class to keep as a working career portfolio.

~ The Classroom Rules ~

No one has the right to interfere with the learning, safety, or wellbeing of others. All school handbook rules and policies will be enforced in class. You are responsible for you own work and your own actions. Students may lose credit in the class for excessive absences during the semester, regardless of whether or not the absences are verified.

~ Student Expectations ~

Students will attend class, work diligently on projects and assignments and actively participate in class discussions. Students will turn in work to their personnel files for grading. Students will notify teacher in advance of days that will be missed due to extracurricular activities so that assignments can be obtained in advance. Students will actively participate in an internship learning experience the entire semester to meet the 135 hours requirement. If the student meets the requirements before the end of the semester, they are still required to participate at the coordinator's discretion. Students are expected to maintain a C (70%) average in all classes to remain in the program.

~ Make-Up Work ~

Make up work may be done in accordance with handbook rules and district policies. It is your responsibility to obtain the make-up work.

~ Transportation ~

Transportation to and from the internship site will be the sole responsibility of the student. Please note and complete the online Private Vehicle Transportation Parental Consent Form.

Grading Policy and Weights

Policy :		Weights For CTE Internship:
Α	90%-100%	20% Aligned checks for understanding: All in-class
В	80%-89%	projects and assignments, personal assessment, career
С	70%-79%	research essay,
D	60%-69%	60% Major assessments and projects: Mentor Evaluations, Essa
		Mock interview, program/internship site paperwork, observati
		Leadership development hours.
F	Below 60%	20% Assessment Task: Production of a comprehensive
		Professional Career ePortfolio





~ Units of Study ~
Learning Module One:
Career Plan
Career Research, Personal Assessment
Learning Module Two:
Business Communications
Cover Letter, Resume, Application, Follow-Up Letter, Thank You Letter
Resume Development
Evaluating Interview Skills
Research Interviewer/Business, Role Play, Participate in an interview, Evaluate Interview Skills
Learning Module Three:
Internship Experience
Skills learned, Colleague Interviews, Standards Development, Professional ePortfolio, Reflection
Private Vehicle Consent Form

We/I give my permission for my student, ______, to:

_____ drive his/her private vehicle from the high school

_____ drive himself/herself and other Interns from the high school

ride with other Interns from the high school

I understand that the Peoria Unified School District #11 and PUSD Administration assumes no responsibility when a student travels in a private vehicle.

Please Note: Release to be initialed by Parent and Student Intern

and _____ Release/Flextime: Please note that during the student's internship time, they will not be in class. Some students will complete their internship hours during their scheduled class time and others will complete their hours after school and/or on weekends. This flextime schedule means the student will be released and *should not be on campus*.

Student	Date
Student (Print Name)	Date
Parent/Guardian	Date
Parent/Guardian (Print Name)	Date
Intern E-mail:	





Peoria Unified School District #11 Work Based Learning Confidentiality Agreement

I understand that I may have access to confidential patient/client information and confidential information about the business and financial interests of my employer (referred to as "Business Partner" in this Agreement). I understand that Confidential Information is protected in every form, such as written records and correspondence, oral communications, and computer programs and applications.

I agree to comply with all existing and future Business Partner policies and procedures to protect the confidentiality of Confidential Information. I agree not to use, copy, make notes regarding, remove, release, or disclose Confidential Information, unless it is permitted by the Business Partner policy.

I agree not to share or release any authentication code or device, password, key card, or identification badge to any other person, and I agree not to use or release anyone else's authentication code or device, password, key card, or identification badge. I agree not to allow any other person to have access to the Business Partner's information systems under my authentication code or device, password, key card, or identification badge. I agree to notify the appropriate administrator immediately if I become aware that another person has access to my authentication code or device, password, key card, or identification badge, or otherwise has unauthorized access to the Business Partner's information system or records.

I agree that my obligations under this Agreement continue after my employment or my time as a volunteer/employee/intern ends.

I agree that, in the event I breach any provision of this Agreement, the Business Partner has the right to reprimand me or to suspend or terminate my employment or volunteer status with or without notice at the discretion of the Business Partner, and that I may be subject to penalties or liabilities under state or federal laws. I agree that, if the Business Partner prevails in any action to enforce this Agreement, the Business Partner will be entitled to collect its expenses, including reasonable attorney's fees and court costs.

Business Partner – Internship Site Company Name

Student

Date

Student (Print Name)

Date

If under 18 years of age, a parent or guardian's signature is also required.

Parent/Guardian

Date

Parent/Guardian (Print Name)

Date





Linkedin Account Waiver Release

Purpose:

Over the past few months, our Internship Program has seen and recognized the need for advancing the use of Web 2.0 technologies in the classroom. Therefore, with clearance and permission from our district, we now have the opportunity to utilize an online tool for students to develop, publish, and share an online portfolio.

Here is the website we will use: students.linkedin.com

This site will afford internship students the opportunity to create an electronic on-line portfolio using Linkedin as part of their internship class. Students will populate their Linkedin account with personal data needed for applying for and obtaining employment, internship experiences and networking with others with same career interests. Students will protect this data with a username and password. Students can grant access to potential employers, internship teachers, and parents if requested.

By checking the appropriate box and signing below, I understand my child will create, revise and post personal information and portfolio requirements to an electronic on-line portfolio program using Linkedin.

If permission is not granted, the student will have the opportunity to construct a hard copy portfolio using a 3-ring binder.

I give my son/daughter permission to use students.linkedin.com at school.

I do not give my son/daughter permission to use students.linkedin.com at school.

Student-Learner	Date
Student-Learner (Print Name)	Date
Parent/Guardian	Date
Parent/Guardian (Print Name)	Date





Peoria Unified School District #11 Work Based Learning Liability and Photographic Release

Student Name:		Age:
Address:		
City:	State:	Zip:
Parent/Guardian Phone:	_ Email:	

In consideration of Peoria Unified School District agreeing to photograph or interview me and in consideration of the use of the facilities and services provided to me by the Peoria Unified School District, the undersigned, both individually and on behalf of the undersigned's children, spouses, heir and legal representatives, does hereby:

- 1. Consent to the use and release to Peoria Unified School District the use of my name and my likeness, (Participant) whether in still, motion pictures, or video tape, my photograph and/or other reproduction of me or my property, including my voice and features, with or without my name, for any editorial, promotion, trade business or other purpose whatsoever. Peoria Unified School District may exercise its rights in any way it sees fit for its productions, for advertising and for other purposes. I intend for Peoria Unified School District to rely upon this release and understand that it is irrevocable; and
- 2. Agrees to release, not to sue, and to indemnify and hold harmless Peoria Unified School District for, from and against any and all injuries, claims, demands, damages, actions, causes of action, suits or judgments of any kind or nature whatsoever (including attorneys' fees and other costs in the defense of any such claim or suit) brought by myself or on behalf of myself as a result of any loss, damage or injury to any persons or property arising out of or in any way relating to any action, inaction or participation in any video or photographic productions of the Peoria Unified School District.

The undersigned further agrees that Peoria Unified School District may use or cause to be used, these items for any and all broadcasts, publications or reproductions, without limitation or reservation or any fee.

Student	Date
Student (Print Name)	Date
Parent/Guardian	Date
Parent/Guardian (Print Name)	Date





Peoria Unified School District #11
Work Based Learning
Student Information Form

Student Name:	(Last)	(First)		(Middle)
Address:	(# and Street)		(City)	(Zip Code)
Home Phone #:		Cell 1	Phone #:	
Personal E-mail	l:			
School E-Mail:				
Mother's Full N	Jame:		Mother's Work	#:
Father's Full Na	ame:		Father's Work #	t:
Parent E-Mail:				

Class Schedule

Please write in your schedule for this semester. Indicate your teacher and room number.

Class	
Teacher	
Class	
Teacher	– "
Class	
Teacher	Room #
Class	
Teacher	Room #



Peoria Unified School District #11



Work Based Learning

Valley Scl	hools Insuranc	e Letter Ackr	nowledgment

	VALLEY SCHOOLS
BOHOOLS	TRUSTS/POOLS
Management E Tom Boone, Ch Ted Carpenter, Jim DiCello, Se Bill Maas, Mem	aiman/CEO Vice-Chaiman Icrelary-Treasurer
М	arch 9, 2009
R	E: Student Participation in Work Programs
D	ear Employer:
st pi si in st co b t	accement in a workplace setting is a collaborative experience between the nudent, the student's family, the employer and the district. The intent is to rovide students meaningful, rewarding and safe work place experiences after gnificant classroom and laboratory training. In the event of an unfortunate acident, the student and his/her family is responsible and liable for the student's actions. The Peoria Unified School District's (PUSD) liability insurance overs the District, its assets and its agents (those being its employees and oard members). In the event a question arises related to an association with the District, staff responsible for risk management will evaluate the situation and respond as determined appropriate.
a p	he District does not provide student's coverage for health insurance. That is lways the responsibility of the student's parents. All students and parents articipating in this program have been advised that student health insurance s not the responsibility of the District.
S	incerely,
-	Tom Bol
	om Bock

By signing, you acknowledge that you have read and understood the district's position on insurance pertaining to your student.

StudentDateStudent (Print Name)DateParent/GuardianDateParent/Guardian (Print Name)Date





Assumption of Risk and Liability 2019-2020

Career and Technical Education

ASSUMPTION OF RISK AND RELEASE OF LIABILITY

has my permission to participate in a course in the following programs: Accounting, Advanced Software Development, Air Force JROTC, Environmental and Agriculture Systems, Automotive, Business, Construction, Culinary Arts, Fashion, Early Childhood Education, Education Professions, Engineering, Film & TV, Finance, Fire Science, Law Enforcement, Marketing, Medical Assisting, Nursing, Software Development, Sports Medicine, Technology Life Careers, Welding **(CIRCLE APPLICABLE PROGRAM)** All PUSD CTE programs emphasize safety, workplace simulated labs, and hands-on learning. Students will be instructed on safe working procedures, and all safety measures *are required* to be followed at all times. Safety equipment is provided and *must* be used by all students.

Students actively operate potentially dangerous equipment in these classes as part of the instructional program, during time spent in the lab after school, and during related student club activities. There is always the possibility of injury if the equipment is improperly used.

Parents are expected to be actively involved in assisting the instructors with the safety of their students. *If your child/ward is on any medication or affected by a medical condition that might affect his/her performance,* the instructor **must** be notified.

In the event of an accident, the school nurse will be contacted and emergency protocol will be followed. If you do not have health insurance, we *highly* recommend that you purchase medical coverage for your child/ward. Student accident insurance is offered through a 3rd party vendor which is assembled at: http://www.kandkinsurance.com. Since students in non-paid Worksite Learning experiences are not considered employees, and employer/employee relationship does not exist, students should provide their own medical and accident insurance. Transportation to and from the place of the Worksite Learning experience is the responsibility of the student. Transportation arrangements must meet with the approval of parents and school administration. Parents or guardians will assume responsibility for the conduct and safety of the student from the time of leaving school until reporting to the job and from the time of leaving the job until arrival at home.

Students not actively participating during class or exhibiting problems with behavior are a safety risk. Failure to comply with all lab safety procedures and/or operate equipment in a safe manner may result in loss of credit and/or removal from the class.

I have carefully read this agreement and fully understand the risks, and I hereby agree to allow my child/ward to participate in this course. In exchange for benefits derived by my child/ward's participation in this course, I hereby agree, to the fullest extent permitted by law, to hold harmless Peoria Unified School District, its officers, employees, or volunteers from and against any claims, damages or liability for injury, death or damage to personal property arising out of, or in connection with my child/ward's participation in this course.

If permission is not granted, the student will be ineligible to participate in the class.

□ I give my son/daughter permission to participate in the above indicated CTE class.

 \Box I do not give my son/daughter permission to participate in the above indicated CTE class.

Signature (mother/guardian)	DATE	Signature (father/guardian)	DATE
Print Name		Print Name	-
Contact Phone Number		Contact Phone Number	-
Student Signature	DATE		
Print Name			





Work Based Learning Training Agreement

Please check one:	Clinical	Cooperative Education	□ Internship (CTE, FTA, etc.)	
Student-Learner Nam	e			
Date of Birth			Age	
Mailing Address			Home Phone	
City		Zip Code	Cell Phone	
E-mail				
Business Partner Emp	loyer-Mento	or		
Business Partner Com	pany			
Business Partner Phor	he		F-Mail	

For the Work Based Learning Program to be fully effective, it is mandatory that certain rules and regulations be followed. The student, his/her Parent/Guardian, the Teacher-Coordinator and the Business Partner Employer-Mentor must agree to fulfill the following responsibilities.

<u>Student-Learner</u> recognizes that the Work Based Learning experiences will contribute to his/her career objectives and agrees to the following:

- 1. Understands there is no guaranteed or assigned workplace.
- 2. Accepts responsibility for providing transportation to and from the workplace.
- 3. Abide by the rules, regulations, policies and procedures of the workplace, the Peoria Unified School District, and the Work Based Learning Program.
- 4. Understands that once a position is accepted, a commitment has been made to the Business Partner Employer-Mentor. It is expected that the student-learner will be at the Business Partner Company for the length of the Work Based Learning.
- 5. Responsible to be at the workplace every scheduled day at the appointed time.
- 6. Follow the directions of the Business Partner Employer/Mentor.
- 7. Do nothing intentionally to disrupt the normal routine of the workplace.

- 8. Exercise confidentiality and respect with regard to information gained at Business Partner Company and Business Partner staff with regard to the Work Based Learning program, teacher-coordinator, or student-learner.
- 9. Be prompt and accurate in completing all required assignments, forms and reports for the Work Based Learning program, the teacher-coordinator, and the Business Partner Employer-Mentor.
- 10. Agrees to demonstrate courtesy, a cooperative attitude, appropriate dress, and a willingness to learn. Behavior to the contrary may lead to dismissal from the Work Based Learning Program and/or the Business Partner Company.
- 11. Understands that any breach of trust, professionalism or ethical behavior (i.e. any evidence of dishonesty with money, merchandise, time or effort) may result in dismissal from the Work Based Learning Program and/or the workplace.

12. Agrees to communicate with the Business Partner Employer-Mentor and the Teacher-Coordinator at all times. *The Parent/Guardian* agrees to:

- 1. Commit to support the student, Business Partner Employer/Mentor, and Work Based Learning Program.
- 2. Participation of the student-learner in the Work Based Learning Program and will encourage the student-learner to effectively carry out duties and responsibilities both in the classroom and at the training site.
- 3. Contact the Teacher-Coordinator regarding all questions/concerns pertaining to the Business Partner Mentor experience.

The Business Partner Employer-Mentor agrees to:

- 1. Abide by Federal, State, and Local regulations regarding employment, job duties and the provisions of an equal opportunity employer.
- 2. Understand and enforce Child Labor Laws (DOL 579.50 subpart E) regarding occupations particularly for the employment of minors between the ages of 16 and 18 of age order, and the exceptions to the order for non-agricultural work.
- 3. The work of the student-learner in the occupation declared particularly hazardous shall be incidental to the training and such work shall be intermittent and for short periods of time, and under the direct and close supervision of a qualified and experienced person.
- 4. Provide applicable general safety guidelines to the work environment.
- 5. Understanding the status of the student while in training shall be that of student-learner; however, work standards expected of the student-learner will be the same as those expected of other beginning workers.
- 6. Function as a training site and as such an employer-mentor will be assigned to the student-learner. This employermentor will be allowed time to work with the student-learner so that this Work Based Learning will be a viable educational experience.
- 7. Provide a variety of related experiences for the student-learner consistent with his or her career/occupational competencies.
- 8. Follow the training plan (a schedule of organized and progressive work experiences) to be performed at the training site.
- 9. Understand that once a position is accepted, a commitment has been made to the student-learner. It is expected that the student-learner will be at the Business Partner Company for the duration of the Work Based Learning unless a serious situation arises or prior arrangements have been made.
- 10. Exercise confidentiality in regard to information gained during the Work Based Learning program.
- 11. Assist in the evaluation of the student-learner.
- 12. Contact the Teacher-Coordinator if any problems arise regarding the student-learner.
- 13. Work with Teacher-Coordinator to mutually agree to transfer or withdraw the student-learner when he/she deems such actions to be in the best interest of those concerned.

Teacher-Coordinator agrees to:

1. Ensure the enrollment of the student-learner is in a state-approved Career and Technical Education Work Based Learning Program.

- 2. Provide related classroom instruction, including safety instruction (especially for hazardous occupations), and make provisions for the student-learner to receive additional workplace readiness instruction.
- 3. Periodically observe the student-learner on the job and to visit with the Business Partner Employer-Mentor in order to aid in the student-learner's development.
- 4. Consult with the Business Partner Employer-Mentor in the evaluation of the student-learner.

By signing below each party agrees to the terms of this agreement and the rules, regulations and provisions of the Work Based Learning Program. Failure to comply with this agreement in whole or part, may result in the dismissal of the student from the Work Based Learning program, disciplinary action, possible failure of course and/or loss of credit.

Student-Learner	Date	Parent/Guardian	Date
Business Partner Employer-Mentor	Date	Teacher-Coordinator	Date

Original: Teacher-Coordinator; Copies to: Student-Learner, Parent/Guardian, Business Partner Employer-Mentor





Career and Technical Education (CTE) Internship Training Plan

tudent-Learner Name:
Susiness Partner Employer-Mentor:
Business Partner Company:
eacher-Coordinator:
tudent-Learner Career Goal: To obtain a CTE Internship experience in the field of my CTE program.

CTE Program of Study:

CTE Program Courses Complete & Dates of Enrollment:

CTE Program Courses in Progress & Dates of Enrollment:

Prior attainment of CTE program standards: (attached)

CTE program standards to be assessed at work site: (attached)

Purpose of the Training Plan:

The Training Plan is a mutually agreed upon guide among the Business Partner Employer-Mentor, the Student-Learner and Teacher-Coordinator as the targeted progression of skills to be obtained by the Student-Learner on the training site by the conclusion of the CTE Internship experience. The minimal State Standards (including State Workplace Standards and State CTE Program Standards) listed are to be addressed according to the agreed upon training plan. The student's career goal will be used as the focus for the development of the training plan. Progress checks will be conducted quarterly.

Workplace Employability Skills Standards		Goa	al	Date	Mentor's
		Dat	e	<u>Achieved</u>	<u>Initials</u>
Complex Communication – Employs complex communication skills in a manner that adds to organizational productivity					
Collaboration – Collaborates, in person and virtually, to complete tasks aimed at organizational goals.					
Thinking and Innovation – Integrates expertise in technical knowledge and skills with thinking and reasonin strategies to create, innovate, and devise solutions	ng				
Professionalism – Conducts oneself in a professional manner appropriate to organizational expectations					
Initiative and Self-Direction – Exercises initiative and self-direction					
Intergenerational Cross-Cultural Competence – Interacts effectively with different cultures and generation achieve organizational mission, goals and objectives	is to				
Organizational Culture – Functions effectively within an organizational culture					
Legal and Ethical Practices – Observes laws, rules and ethical practices					
Financial Practices – Applies knowledge of finances for the profitability and viability of the organization					
CTE Program Standards	<u>Goal</u>	Date		<u>Date</u> chieved	Mentor's Initials

Select the six CTE program standards that best relate to your internship responsibilities.

Business Partner Mentor-Employer Goals (goals can include specific job functions or goals)	<u>Goal Date</u>	<u>Date</u> Achieved	<u>Mentor's</u> Initials
Read company philosophy and/or mission statement			
Follow company policy and procedures including attendance (Who do I contact when I need to miss?)			
Comply with company safety standards			
Describe company hierarchy			
Learn company hiring and promotion process			

Identify with your mentor at least three other goals.

Student-Learning Goals	Goal Date	Date	Mentor's
(Goals will include skill sets leading to career goal)		Achieved	Initials
Obtain a CTE Internship experience in my career choice			
Complete the required hours for my CTE Internship experience			
Identify next steps in my career plan			
Receive a recommendation letter from my employer/mentor			

Identify at least three other goals

The Business Partner Employer-Mentor carries the responsibility to comply with all applicable federal and state laws. The CTE Internship Experience will not interfere with the schooling of the minors or with their health and well-being.

I have received and read a copy of my responsibilities and will abide by them:

Business Partner Employer-Mentor:	_Date:
Student-Learner:	_ Date:
Teacher-Coordinator:	_ Date:
Project Area Advisor	_Date:





Work Based Learning Project Agreement

Peoria Unified School District #11 CTE Internship Program Work Based Learning Project AGREEMENT

Date			
Student Name		_Date of Birth	Age
Mailing Address			
Cell Phone	E-mail		
Project Area:			
Project Location			
Project Area Advisor Name	E-mai	ι	

A Work Based Learning Project is a real world project completed on site on Peoria Unified property. This project will be monitored and lead by a Project Area Mentor.

For the Work Based Learning Project to be fully effective, it is mandatory that certain rules and regulations be followed. The student, his/her Parent/Guardian, the Teacher-Coordinator and the Project Area Advisor-Mentor, and Business Partner must agree to fulfill the following responsibilities.

<u>Student</u> recognizes that the Work Based Learning experiences will contribute to his/her career objectives and agrees to the following:

- 13. Understands there is no guaranteed or assigned workplace.
- 14. Accepts responsibility for providing transportation to and from the workplace.
- 15. Abides by the rules, regulations, policies and procedures of the workplace, the Peoria Unified School District, and the Work Based Learning Program.
- 16. Understands that once a position is accepted, a commitment has been made to the Project Area Advisor -Mentor. It is expected that the student-learner will be at the Project Site for the length of the Work Based Learning commitment.
- 17. Responsible to be at the workplace every scheduled day at the appointed time.
- 18. Follow the directions of the Project Area Advisor /Mentor.
- 19. Do nothing intentionally to disrupt the normal routine of the workplace.
- 20. Exercise confidentiality and respect with regard to information gained during the Work Based Learning Project.
- 21. Agrees to demonstrate courtesy, a cooperative attitude, appropriate dress, and a willingness to learn. Behavior to the contrary may lead to dismissal from the Work Based Learning Program.
- 22. Understands that any breach of trust, professionalism or ethical behavior (i.e. any evidence of dishonesty with money, merchandise, time or effort) may result in dismissal from the Work Based Learning Program.
- 23. Agrees to communicate with the Project Area Advisor -Mentor and the Teacher-Coordinator at all times.

Parent/Guardian understands and acknowledges the following:

My child wishes to participate in the Peoria Unified School District Work Based Learning Program. I realize there are inherent workplace risks involved in my child's participation. Although a rare occurrence, I recognize the possibility that my child may suffer an injury as a result of participation in this program. I agree to accept these risks as a condition of my child's participation in this program.

Furthermore, I understand that notifications of any pre-existing conditions that may create an additional risk for my child are disclosed below to all parties signing this form. My child:

does NOT have a pre-existing condition that may create an additional risk for him/her.

has a ______condition(s) that creates additional risk for him/her. I understand that, because of his/her condition, the special risks for my child are:

I understand these concerns and agree to follow all directions and recommendations of my child's physician. I also understand that I am responsible for any insurance coverage for my child during his/her participation in this program.

The Parent/Guardian further agrees to:

- 4. Commit to support the student, Business Partner Employer/Mentor, and Work Based Learning Program.
- 5. Participation of the student-learner in the Work Based Learning Program and will encourage the student-learner to
- effectively carry out duties and responsibilities both in the classroom and at the training site.
- 6. Contact the Teacher-Coordinator regarding all questions/concerns pertaining to the Business Partner Mentor experience.

The Project Area Advisor (Mentor) and Business Partner agrees to:

- 14. Abide by Federal, State, and Local regulations regarding employment, job duties and the provisions of an equal opportunity employer.
- 15. Understand and enforce Child Labor Laws (DOL 579.50 subpart E) regarding occupations particularly for the employment of minors between the ages of 16 and 18 of age order, and the exceptions to the order for non-agricultural work.
- 16. The work of the student-learner in the occupation declared particularly hazardous shall be incidental to the training and such work shall be intermittent and for short periods of time, and under the direct and close supervision of a qualified and experienced person.
- 17. Provide applicable general safety guidelines to the work environment.
- 18. Understanding the status of the student while in training shall be that of student-learner; however, work standards expected of the student-learner will be the same as those expected of other beginning workers.
- 19. Function as a training site and as such an employer-mentor will be assigned to the student-learner. This employer-mentor will be allowed time to work with the student-learner so that this Work Based Learning will be a viable educational experience.
- 20. Provide a variety of related experiences for the student-learner consistent with his or her career/occupational competencies.
- 21. Follow the training plan (a schedule of organized and progressive work experiences) to be performed at the site.
- 22. Understand that once a position is accepted, a commitment has been made to the student-learner. It is expected that the student-learner will be at the Business Partner Company for the duration of the Work Based Learning commitment unless a serious situation arises or prior arrangements have been made.
- 23. Exercise confidentiality in regard to information gained during the Work Based Learning program. Assist in the evaluation of the student-learner.
- 25. Contact the Teacher-Coordinator if any problems arise regarding the student-learner.
- 26. Work with Teacher-Coordinator to mutually agree to transfer or withdraw the student-learner when he/she deems such actions to be in the best interest of those concerned.

Teacher-Coordinator agrees to:

- 5. Ensure the enrollment of the student-learner is in a state-approved Career and Technical Education Work Based Learning Program.
- 6. Provide related classroom instruction, including safety instruction (especially for hazardous occupations), and make provisions for the student-learner to receive additional workplace readiness instruction.
- 7. Periodically observe the student-learner on the job and to visit with the Business Partner Employer-Mentor in order to aid in the student-learner's development.
- 8. Consult with the Business Partner Employer-Mentor in the evaluation of the student-learner.

Student Name	Date	Parent/Guardian	Date
Project Area Advisor (Mentor Name)	Date	Teacher-Coordinator	Date

Business Partner

Peoria Unified school District

Work Based Learning Project Assignment

Student Name:	Student ID#
Project Area Advisor:	Internship Teacher:
Business Partner:	

Project Description and Objectives Give a brief description of the project with purpose, outcomes and timeline				

By signing below each party agrees to the terms of this agreement and the rules, regulations and provisions of the Work Based Learning Program. Failure to comply with this agreement in whole or part, may result in the dismissal of the student from the Work Based Learning program, disciplinary action, possible failure of course and/or loss of credit.

Student Signature:	Date:	Parent Signature:	Date:
Project Area Advisor Signature:	Date:	Internship Teacher Signature:	Date:
Business Partner Signature:	Date:	Campus Administrator Signature:	Date: