

SHASTA UNION HIGH SCHOOL DISTRICT

2200 Eureka Way, Suite B

Redding, CA 96001

Phone # (530) 241-3261 Fax # (530) 225-8499

Code: _____

Units Granted _____

Date Approved _____

WE Teacher _____

APPLICATION FOR GENERAL WORK EXPERIENCE

School: E F P S Application Date: _____

Name: _____ ID#: _____ Age: _____ Date of Birth: ___/___/___ Sex: M F

Address: _____ City: _____ Zip: _____ Phone: _____

Social Security No.: ___/___/___ Grade in School: _____ Counselor: _____

Work Permit Issued: _____ Date Attendance Office Verification: _____ Signature

Counselor's Approval of Student Program: _____ Signature Date Approved: _____

Class Schedule Including Outside Work Experience

Period	Subject	Room	Period	Subject	Room

Training Plan and Job Description (Prepared by Student and Work Supervisor) It is expected that I will: (a) develop effective and realistic work habits; (b) identify with and participate in adult roles and responsibilities; (c) recognize that courses taken in school relate to career requirements and my success on the job; (d) perform specific job duties listed below:

1. _____
2. _____
3. _____
4. _____

Business Name: _____ Business Phone Number: _____

Address: _____

Student's Job Title: _____ Student's Job Supervisor: _____

Work Schedule

	Begin	End
Monday	_____	_____
Tuesday	_____	_____
Wednesday	_____	_____
Thursday	_____	_____
Friday	_____	_____

	Begin	End
Saturday	_____	_____
Sunday	_____	_____

****Students must work a minimum of 2 weekdays (Monday - Friday) ****

The Shasta Union High School District does not discriminate based on sexual orientation, gender, age, sex, ethnic group identification, race, ancestry, national origin, religion, color, marital status, parental status, pregnancy, mental disability or physical disability.

Enterprise High
(530)222-6601

Foothill High
(530)547-1700

Pioneer High
(530)243-1880

Shasta High
(530)241-4161

North State Independence High
(530)245-2760

Student Contractual Agreement

1. Complete and return all required forms by the specified time to the appropriate person.
2. Maintain 2.0 G.P.A. in courses in which I am enrolled.
3. Attend all related classes, meetings, and complete any other required assignments.
4. Immediately report to the W/E teacher any unsatisfactory aspects of job placement.
5. Immediately notify the W/E teacher if terminated from job. If this is not done, I will receive a **Fail** for semester grade.
6. Serve my employer and his business in a loyal, courteous, and conscientious manner.
7. Turn in to the W/E office accurate records of time worked as verified by my job supervisor.
8. Work at my job station only on days that I am in attendance at my respective high school, excluding non-school days.
9. Maintain satisfactory attendance record free of school truancies as these may cause my removal from the program and a severe grade penalty.

Student's Signature

Date

Parent Approval for Work Experience Education

As a parent or guardian of _____, I give my consent to his/her employment off school premises during and after school hours for the purpose of work experience for school credit. Transportation will be provided by the parent or student. I fully understand the program and agree not to hold the employer, school district, or instructor liable for any injuries sustained by the aforementioned student due to causes beyond the control of the instructor or employer.

I realize that in the event a student drops his/her work experience assignment during the semester, he or she will lose credit for the course. I further understand that it shall not be possible to reassign a student to a different class period until the following semester. In this instance, for all practical purposes, the student would be shortening his/her school day.

Parent's/Guardian's Signature

Date

Employer Agreement for Work Experience Education

The major purpose of this program is to provide valuable work experience education for students. Employer responsibilities include:

1. To instruct the student as to rules, regulations, and duties of the job. (Students tend to succeed when the employer has adequately acquainted them with the work to be done.)
2. To provide adequate supervision to insure a planned program of the pupil's job activities in order that the pupil may receive maximum educational benefits.
3. To protect the student through worker's compensation coverage.
4. To abide by all State and/or Federal Labor Laws, to assure safety regulations, and to pay prevailing legal minimum wages.
5. To maintain accurate records of the pupil's attendance.
6. To consult the Work Experience teacher regarding problems or questions concerning student employees or the Work Experience Program.
7. To complete quarterly evaluations of the student's work. (This constitutes a portion of the report card grade.)
8. To inform the Coordinator promptly if terminating the student's employment.
9. To schedule student employee for work (September-May) so student may attend required Outside Work Experience related instruction class one day per week.
10. As an employer, I agree not to discriminate on the basis of sexual orientation, gender, age, sex, ethnic group identification, race, ancestry, national origin, religion, color, marital status, parental status, pregnancy, mental disability, or physical ability.

Employer's Signature

Date

Work Experience Teacher Responsibilities

1. To instruct students in the Work Experience Education program in their dual responsibility to the employer and to the school.
2. To visit the student's workstation and discuss with their employer ratings and reports.
3. To grade the student with guidance from employer ratings and reports.
4. To be available to student and employer alike regarding problems or questions concerning the program and/or its participants, e.g., child labor laws.

Coordinator's Signature

Date