

3128 Graydon Ave, East Troy, WI 53120 Phone: 262-642-6760 • Fax: 262:-642-6776 **Stacey Kuehn, Principal** 

kuesta@easttroy.k12.wi.us

Committed to the Growth & Success of Each Student, Each Year

# Work Experience Training Agreement

Last Name:				First Name:						
Address:						City:		St:	Zip:	
Employer:				Student Job Title:						
Employer Address:										
Supervisor'	Name:				Super	visor's Primary	Phone Nur	nber:		_
Daily Work	Schedule- List any possi	ble days and	d hours yo	ur emplo	yer may sc	hedule you to	work.			
	Day of the Week				Sch	nedule				
	Sunday									
	Monday									
	Tuesday									
	Wednesday									
	Thursday									
	Friday									
	Saturday									
Student Res	sponsibilities:									
•Stude •Stude •Stude •Stude •Stude •Stude •Stude •Stude  •Stude  •Stude  stude •Stude •Stude •Stude •Stude	k permit is required for nts will notify their emp nts shall not go to work nool or work shall be gronts shall dress appropriants shall follow the regunts must be on track to nts shall report any content leaving for the job, serive .5 credit per trimes as requirements (turning nts will be dropped from the da student lose a job the thin a reasonable amour	loyers as so on any schounds for disately for the lations/poligraduate to templated cutudents will ster for Work in the Work in the program rough no fa	on as possible of the control of the	sible if the art they are my the World and dilige employed the World their workign out and the extended to the place of the place of the their work and the place of the place	ey will be a e not in att ork Experie ently/faithf er and schook k Experience k or schoo t the atten ents must be ter evaluat in if they fai d in a study e school co	endance with sence Program fully preform alsol ce Program I program to the dance office be employed at ions) il the first trime y hall during for pordinator will y	school. Un Il work act the school of the least 180 the ster or are the rema work with	reasonable ivities coordinator hours a tri e fried fron inder of th the studer	r before the cl mester and m n their jobs. S e trimester nt to find anot	nange. eet the hould a
	e trimester d and will comply with t	hese Studer	nt Respons	sibilities o	of the Worl	k Experience Pr	ogram.			
Student's Si	gnature:					Date	ı.			



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### Parent/Guardian Responsibilities:

- Parents/Guardians should understand that the Work Experience Program is organized and maintained primarily for high school juniors and seniors to secure jobs that will train them as potential full-time employees and give them knowledge to set career goals.
- Parents/Guardians will guarantee transportation to the job site.

Coordinator's Signature: \_\_\_\_

- Parents/Guardians will be responsible for the personal conduct of their student while participating in the Work Experience Program, and ensure their child complies with the Student Responsibilities section.
- Parents/Guardians should know their students work schedule and will assume full responsibilities for any actions or happenings pertaining to their student from the time they leave school, until reporting to the job site (especially if their student does not report to the job site immediately after school or every day).
- Parents/Guardians are responsible for insuring their student against any hazard, the conduct of their student, and transportation to/from work.

I understand and will comply with these Parent/G	Guardian Responsibilities for the Work Experience Program.
Parent/Guardian Signature:	Date:
Employer/Supervisor Responsibilities	
Employers/Supervisors shall function within the le Departments	egal labor and wage requirements as established by the Federal and State Labor
<ul> <li>Employers/Supervisors shall train students f</li> </ul>	for the work activities necessary for job-related duties.
· · · · ·	one-page trainee evaluation during each school marking period enabling the school
· · · · · ·	ol coordinator of any violations pertaining to company policy at least two weeks s infraction can cause immediate dismissal.
<ul> <li>Employers/Supervisors will comply with the Rehabilitation Act of 1973, and Title VI of</li> </ul>	I coordinator to observe students at work during mutually agreed upon times. e provisions of Title IX of the Education Amendments Act of 1972, Section 504 of the fine Civil Rights Act of 1964 by not discriminating on the basis of sex, handicap, nent and assignment of students to jobs, hours of employment, and levels of
I understand and will comply with these Employe	rs/Supervisors Responsibilities of the Work Experience Program.
Employer's Signature:	Date:
School Responsibilities	
•The school coordinator will work with the entheir employment. Classroom activities w	mployer to ensure that the student will participate in a variety of job tasks during will reinforce the on-the-job training.
	to evaluate student/trainee progress at mutually agreed times. or, in conjunction with the principal, has the right to withdraw the student/trainee rogram.



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Student's Name:	Week of:

Your student employee will fill in the weeks schedule at the beginning of every week. There may be times when hours are changed. The second column "Hours Actually Worked" must be filled out by the work site supervisor at the end of the workweek. The actual hours worked by the student must be shown here. When you sign the sheet, you are stating that the student was working at that time. These sheets are due to the coordinator no later than one (1) week after the hours worked for the student to receive credit for that week.

time. These sheets a that week.	re due to the coordinator no later than one (1) week after the hours wor	ked for the student to receive credit for
Day of the Week	Schedule (to be completed by the student at the beginning of each week)	Hours Worked (to be completed by the supervisor)
Sunday		
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
	Total Hours Worke	d:
Student's Signature:		Date:
Supervisor's Signature:		Date:

#### **Employer Checklist:**

Situations may come up on the work site that needs immediate communication between you and the school. Please call Dominique Boston, at (262) 642-6760 x 5228 immediately if the following situations occur on the job site:

- The student is absent from the job site (unless notified that the student will not be working that day).
- If there is a change in work habits or the quality of work is poor.
- The student's skills are not meeting your expectations for the job assignment.
- The student is experiencing human relation problems (poor attitude, problems with co-workers, etc.)

The success of this program is having open lines of communications between the work site and the school coordinator. By working together, we can help educate a teenager in positive way, giving that student a good work ethic and technical skills.

Thank you for participating in our students' learning experiences.



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# **Work Experience Expectations**

Ms. Dominique Boston
ETHS Counselor/Work Experience Coordinator
East Troy High School
262-642-6760 x 5228

- I. Complete Training Agreement (Due 10 days after start of trimester- without these forms, you will be placed in a study hall after the 10<sup>th</sup> day.)
- 2. Turn in completed weekly timesheets with employer signature or attached documentation.
- 3. Complete 180 work hours a trimester (approx. 12 hours per week) to receive .5 credit (double that amount to receive 1.0 credit)
- 4. Sign out daily in attendance office before leaving school
- 5. Following student requirements on Training Agreement
- 6. Present yourself in a 1 st Class manner (Respect, Responsibility, and Integrity)!

## Requirements:

- I. Worksite Visit:
  - a. You are to arrange a worksite visit/phone call (30-60 minutes) which will include a meeting between you, your employer and me. I would like to see who/where you work, what your primary responsibilities are at work and talk to your employer about your performance. The meeting must planned TWO WEEKS prior to the ACTUAL meeting. See me with any questions.
- 2. Final Exam Options: Please complete ONE of the following two options.
  - a. Option 1:
    - 1. Create a cover letter to employer/college
    - 2. Create a resume
    - 3. Two letters of recommendation (one from school, one from outside source)
  - b. Option 2:

Directions: Please reflect back on your work experience placement and answer <u>FIVE of the six</u> reflection questions. Your exam should be typed and you may choose to answer in one essay or in paragraph form for each bullet. Each question should be answered with specific details and examples from your position. Approximate length of this project is two to three pages.

- Describe your work experience job/placement and the responsibilities it entailed.
- O What skills and knowledge did you gain from your work experience placement?
- o What are your short-term and long-term career goals and what is your plan to achieve them?
- o How did your current position help you achieve your career goals?
- O What areas do you think you need further improvement?
- Describe what a "good problem solver" is like and why employers need their employees to be good problem solvers?