Career Exploration Program Interest Form 2019/2020

Please print clearly and have a parent sign at the bottom. Turn in completed form to the CCC or send electronically to Mrs. Diane Willock, Career Program Manager, at dwillock@d125.org

Date: ____________

Name ___________________________________________ Student ID ____________________

Student email ___________________________ Counselor ___________________________

How did you hear about the program? ___________________________________________

I am interested in (you may check more than 1)

___*Setting up a Career Shadow, Career e-mail mentorship, Career Interview and/or other career opportunities (*see box below)

___Career Development Action Plan
Participate in a career assessment(s), discuss interests and career options and develop a year by year plan to keep on track for career exploration. Will include discussion on possible career shadows and opportunities. Most applicable to students who have not yet started, or are at the beginning of, the career exploration process.

___Help on resume development, interview skills or personal branding (how you present or portray yourself to others)

___Learning about summer opportunities

*Career Shadows will be scheduled on Institute Days, Breaks (Winter/Spring), June, and periodically on school days throughout each semester (1-2x) based on the shadow host’s (Business or Organization) availability. YOU WILL BE LIMITED TO PARTICIPATING IN 1 SHADOW PER SEMESTER.

Career E-mail mentorships, career interviews or other career opportunities may be available when career shadows are either not available in your area of interest or not conducive to an on-site experience.

*Due to HIPAA LAWS AND HIGH DEMAND, shadows in medicine fields are EXTREMELY difficult AND limited. These shadows ARE NOT GUARANTEED; we will discuss all options at initial meeting AND you may be LIMITED TO 1 SHADOW depending on discipline.

Please list at least 2 areas of interest as you are not guaranteed a shadow in your first area of interest. You may list specific careers or general areas (engineering, business, etc)

1.

2.

3.

List any conflicts
Please list any dates/times that would conflict with scheduling a shadow (sports practice days, work days, religious holidays, etc.) and if you are available during breaks: Winter, Spring, Summer (June)
Please complete the questions, essay and parent section below.

Please list Stevenson clubs or activities you are involved in:

Please list any outside activities, clubs or jobs

In a brief paragraph, please tell me a bit more about yourself and what you hope to gain from participating in the Career Program

Parent section
Please sign below to acknowledge your (son/daughter’s participation) in the Career Exploration Program

______________________________________________  Printed Name_______________________________

PARENTS: We are always looking for professionals who would like to share their career knowledge. If you are interested in becoming a career mentor for our students and hosting them for a job shadow or internship, or being a part of our Career Expo, please provide your email below and I will contact you. Thank You.

______________________________________________  Printed Name_______________________________

Diane Willock, CPCC
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