

PCR Applied & Experiential Learning Requirement

Please PRINT both FIRST and LAST name CLEARLY.

No credit will be given if we can't read the form!

Name _____

Date _____

Check Applied & Experiential Learning Experience:

- | | |
|---|--|
| <input type="checkbox"/> Work Based Learning Seminar/OJT | <input type="checkbox"/> Employment |
| <input type="checkbox"/> Mentorship Class | <input type="checkbox"/> Graphics Mentorship Class |
| <input type="checkbox"/> Mgmt & Market II Internship | <input type="checkbox"/> Youth Apprenticeships |
| <input type="checkbox"/> SpEd Job Skills | <input type="checkbox"/> Internships |
| <input type="checkbox"/> Early Childhood Experience Class | <input type="checkbox"/> Tour |
| <input type="checkbox"/> Step-Up Participant | <input type="checkbox"/> Service Learning |
| <input type="checkbox"/> AP Biology Experience | |
| <input type="checkbox"/> Complete a Job Shadow Activity | |
| <input type="checkbox"/> Informational Interview | <input type="checkbox"/> Other: _____ |

Please write a brief description of your experience and what you learned from the experience:

Supervisor/Instructor Signature _____ **Date** _____

½ day excused (SCH absence, noted as Job Shadow/Experiential Learning) up to once a year; monitored and confirmed by Connect teacher by end of Senior Year starting with Class of 2016 as a graded assignment in PCR.

Student will document Experiential Learning in MCIS by going to the “Plan Tab” then “Career Plan” and then “Next Steps”. On left hand side under “Make Plans” choose “Experiential Learning Plans” and complete questions, inserting today’s date and “Save Information”.

Show form to attendance office and turn in paper form to your PCR Connect teacher by May 1st of your Senior Year for approval.