

### **Off Campus Learning Experience (OCLE) Form**

An **OCLE** is a learning situation where a student may work at a job, volunteer at an agency or as a teacher's aide, seek private tutoring or engage in another instructive endeavor. These placements are cooperatively agreed upon by student, parent or guardian, counselor and the principal. Final approval lies with the principal pursuant to the regulations or rules adopted by the Granville Board of Education or as established by the Superintendent of schools.

#### **Specific examples of OCLE placements are as follows:**

- 1. Volunteer** – Students may work voluntarily at an area agency, at the hospital, at a school or at another worksite.
- 2. Tutoring** – Students may seek outside tutoring for course assistance or to tutor other students.
- 3. Employment** – Students may be employed at a job related to their needs or to career plans.
- 4. Work Study** – Special Education students could take advantage of an opportunity where they go to school, work part time, and receive credit for their work.

#### **Rules for an off-campus learning experience and the application procedure:**

- 1.** The student must obtain an application for an OCLE in the counseling office. The student must apply and be granted an OCLE before the schedule is adjusted.
- 2.** A parent or guardian must agree to the OCLE placement and absolve the school personnel of all liability related to the student's participation there. The OCLE must be signed by student, parent or guardian, employer or supervisor, and principal before the student may begin his/her off-campus experience.
- 3.** Students will report to their assigned location in a timely manner and be present there following the schools' attendance policy.
- 4.** Parent, guardian, supervisor or employer shall notify the school if the student is late or quits his/her OCLE activity whereby the student will begin regular attendance at the high school.





**Off Campus Learning Experience (OCLE) Application**

**Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Circle the type of OCLE you want to do?**

**Volunteering**

**Tutoring**

**Employment**

**Work Study**

**Describe where your OCLE will be and what you will be doing below:**

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**If your OCLE is for employment, please indicate where you will be working and have your employer sign below indicating that you will be going to work:**

**Place of Employment:** \_\_\_\_\_

**Position:** \_\_\_\_\_

**Employer Name:** \_\_\_\_\_

**Employer Signature:** \_\_\_\_\_

**Please sign below verifying the details of the OCLE application below:**

**Student Signature:** \_\_\_\_\_

**Parent/Guardian Signature:** \_\_\_\_\_

**Principal Signature:** \_\_\_\_\_

**Turn in to your school counselor when application is complete.**

