



# APPLICATION FOR WORK-BASED LEARNING PROGRAM

## Part 1 - Student Application

Date:		Student First and Last Name:	
Student I.D #:		Date of Birth:	
Address:		City:	Zip Code:
High School:		Current Grade:	Graduation Year:
Parent's/Student's E-mail:		Home Number:	
Mother/Legal Guardian Name:		Daytime Telephone:	
Father/Legal Guardian Name:		Daytime Telephone:	
Parent/Guardian Cell #:		Student's Cell #:	
Have you decided upon a career? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what career?			
Current Place of Employment:		Phone Number:	
Address:		City:	
Supervisor's First Name:		Last Name:	
<p>Is your current job in a career field you wish to pursue? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Do you plan to keep this job? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If no, what type of job placements are you interested in?</p> <p>Your job must be program related and must be approved by the coordinator.</p>			
1 <sup>st</sup> choice:		2 <sup>nd</sup> choice:	
<b>List any previous work experience:</b>			
<b>Company Name:</b>	<b>Dates Worked:</b>	<b>Primary Duties</b>	
Do you currently have a valid driver's license? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, how do you plan to get to work?			
<b>Outline your plans for post-secondary education or training:</b>			
Where do you plan to go to college or be trained?			
What will be your major concentration of study?			
List any courses or training you have completed which will aid in evaluating your qualifications for <b>Work-Based Learning Program</b> . For example, if you are pursuing a career in the medical field, which science courses have you taken? If you are pursuing a career in a business field, which business courses have you taken?			
How many periods of WBL do you wish to register for? (You may take 1, 2, or 3 periods of WBL, but keep in mind you must still have room for a Lunch/Guided Study period in your schedule.)			

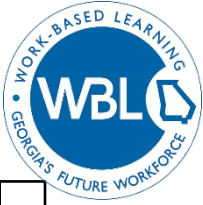
## You must turn in one recommendation from a teacher, a counselor, or a school administrator with this application.

### I understand that

- enrollment in a Gwinnett County Public School's work-based learning program is limited and that making application for enrollment does not mean that I will automatically be accepted;
- an interview with a work-based learning coordinator will be a part of the application process to determine a match between my career goals and my current and previous academic classes;
- once accepted, I must complete all required forms one of which includes acceptance of my responsibilities under the program guidelines;
- my grades, discipline record, and attendance record may be checked by the coordinator prior to acceptance into the program;
- if, after the semester begins and the student has to finalize his/her schedule and the student still has not become employed, he or she will be required to request a schedule change and will be enrolled in regular classes with a regular class schedule. (Check with your teacher to find out what your school's grace period is for schedule changes);
- students may be required by their employer to work holidays, weekends and/or Spring Break;
- if a period of unemployment occurs within or at the end of a semester, the student will be placed under coordinator or administrator supervision for the work release periods and may not leave campus without permission of the coordinator or administrator;
- In the event the student loses his/her driver's license, other transportation will be the responsibility of the student and/or family. Continuation of work is necessary to complete the required number of hours for credit.
- Students who complete the required hours for the course prior to the end of the semester will not be allowed to leave their job, because work credit is based on continuous employment until the end of the school term.
- Students must leave campus when regular classroom instruction is complete each day.
- Student placement in private homes or the provision of home-bound services at private homes is **not allowed**.
- Students may not be supervised by an immediate family member.

Confidentiality in all jobs is a must. Your employer takes confidentiality very seriously and may require you to sign a confidentiality agreement. Prior to taking photographs or using any forms, reports, etc. as samples for your portfolio, you must obtain permission in advance from your employer. **Any breach of confidentiality required by your employer or any other offense that results in your termination will, in turn, result in the loss of your work-based learning credit.**

The student is required to check with their local school to determine the minimum number of hours required in this program. By signing below, the student and Parent/Guardian acknowledge understanding of the above and agree that this student is permitted to apply to Gwinnett's County Public School work-based learning program. If the student is accepted, he/she will abide by all requirements of the program.



## Part 2 - Parent/Guardian Consent

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**Work Based Learning Early Release Consent:** *I understand that my child named above is enrolled in the work-based learning program at the school listed above and that my child will be dismissed from school at the end of his/her regularly scheduled on-campus classes each day. I assume full responsibility for my child after dismissal from school, including days when my child is not required to be on the job.*

**Transportation Consent:** (School-provided transportation is not available to work sites.)  
*I hereby give my son/daughter/ward permission to drive to their designated work site. I expressly release the work-based learning program work site, local school and the Gwinnett County Public Schools and any agents of the employer or the school system from any liability that may result from my son/daughter/ward's use of his/her individual transportation. My child is covered by automobile insurance as follows:*

**Field Trip/Class Projects:** *Permission is granted for my son/daughter/ward to participate in field trips and class projects during the session(s) he/she attends Gwinnett County Public Schools. Transportation may be provided by the school system. In addition, another form requiring signature may be required by the local school designating the destination and purpose of the field trip along with the departure and return date information.*

**Photo/Media Release:** *I hereby give my consent to all photographs, audio recordings, and/or video recordings taken of me or my minor child by Gwinnett County Public Schools or their designee. I understand that any photographs, audio recordings, and/or video recordings become the property of the local school/district/designee and may be used by the school, district, or others with the consent, for educational, instructional, or promotional purposes determined by the district in broadcast and media formats now existing or to be created in the future.*

**Student Record Release:** *I authorize the Gwinnett County Public School System to release my son/daughter/ward's academic and attendance records to any potential employer and I agree that the Gwinnett County Public Schools and its agents will be absolved of any responsibility in connection with such release. This authorization can be cancelled at any time by written notice to the Work-Based Learning Coordinator. I acknowledge that my child's grades is visible on the Parent Portal.*

**Background check:** *If required for employment, I authorize a prospective work-based learning employer to conduct a background check including criminal history, employment history and education history as a condition of my son's, daughter's or ward's employment.*

### Health/Medical:

**Treatment Consent:** *I hereby authorize the school or the work-based learning coordinator or work-site mentor to secure emergency medical treatment. I will assume all financial responsibility.*

**Insurance:** Student is   or is not covered by medical insurance.

*Some employers require prospective employees to participate in drug screening procedures. In such cases, this procedure becomes a condition of participation/employment. I hereby consent to required drug screening of my child or ward as a condition of employment and subsequent drug screens as dictated by the company's drug policy.*

*Some employers may require a physical examination and/or tetanus or tuberculosis vaccination. I consent to a company required physical examination and/or company required vaccinations as a condition of my son's, daughter's or ward's employment.*

**HAVING READ WITH UNDERSTANDING THE ABOVE, I HEREBY GIVE MY CONSENT TO THE ENROLLMENT OF MY SON/DAUGHTER/WARD IN A WORK-BASED LEARNING PROGRAM**



### Part 3 - Student Age Verification

- A. My date of birth is: \_\_\_\_\_
- B. I am or will be at least 16 years of age as of September 1st of the current school year, therefore, I am not required to obtain a work permit.
- C. **IF YOU WILL NOT BE 16 YEARS OF AGE BY SEPTEMBER 1st OF THE SCHOOL YEAR, YOU MUST OBTAIN A WORK PERMIT:**
  - 1. In order for a work permit to be signed by a designated school official, the following information must be provided on the work permit form obtained from the school's main office.
  - 2. Information from the Minor's Birth Certificate - - this section should be completed by the student's parent or guardian
  - 3. You cannot obtain a work permit until the employer section is completed.
  - 4. Employment Information - - this section must be completed by the employer and not by you. Also, it is mandatory that the employer's signature and title appear on the permit before it can be signed by a school official.
  - 5. Once the above information has been completed, the work permit form should be carried to the school to be signed. Some form of **proof of age** must be presented to the designated school official. **A driver's license or birth certificate** is acceptable for proof of age. The school official will complete the work permit form and return the white copy of the form and a work permit card to you. Give the white copy of the work permit form to your employer. **Make a copy of this form and your card and turn this copy into your coordinator to be kept on file.** Keep the work permit card. Once you reach 16 years of age, you will not need a work permit.

By submitting forms, you agree to follow all the policy and procedures for the Brookwood Work-Based Learning program

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_



*It is the policy of the Gwinnett County School System not to discriminate on the basis of race, color, sex, religion, national origin, age, or disability in any employment practice, educational program, or any other program, activity or service. If you wish to request an accommodation or modification or to make a complaint due to discrimination in any program, activity or service, contact:*

**The Office of Internal Resolution**  
**437 Old Peachtree Road, NW, Suwanee, Georgia 30024**

**School Use Only ~ Do Not Write Below This Line**

Apprenticeship                       Co-op                       Internship

*Approved                      Hold                      Recommend another program:*