Worksite Learning
SHS Student Packet

Ms. Jessica Hall
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Instructions: Please initial each section to verify that you have read and will comply.
(if student is 18 years old, parent/guardian initials and signature below are not required)

Student Initials	Parent/ Guardian Initials	
		Work hours cannot be counted until all paperwork is complete and turned in, according to the Office of Superintendent of Public Instruction.
		Student will report work hours weekly (Monday – Sunday) by submitting their *Student Work Hours* spreadsheet on *Canvas.
		Students can earn ½ credit for every 180 hours reported (AFTER the paperwork is completed/received).
		Student will check ISD email and/or Canvas daily (M-F) and respond to any requests from WSL Coordinator. If WSL Coordinator doesn't receive a response in a reasonable amount of time, and an in-person school visit is unsuccessful, parent/guardian will be contacted.
		When resigning from a job, student will give a verbal and written two (2) weeks' notice to the employer and then inform the WSL Coordinator of resignation.
		When resigning from a job, student will let the WSL Coordinator know that all hours have been reported and that they no longer work for the employer.
		When changing jobs, the student will notify the WSL Coordinator to complete the appropriate paperwork for the new job.
		Student will initial/sign all periodic evaluations and closing paperwork for the course in order to receive the high school credit.

*Instructions will be emailed once paperwork has been received. The student will need to check their email provided in this packet to receive instructions.

Student Name (Printed): _____

Student Signature: _____

Parent/Guardian Name (Printed): _____

Parent/Guardian Signature: _____

☐ Student is 18 years of age and does not require Parent/Guardian initials and signature.

High School and Beyond Information

Worksite Learning (WSL)

Complete this entire page

Worksite Learning provides students the opportunity to learn in the workplace, while applying skills and knowledge obtained in a qualifying CTE course. Worksite Learning occurs at a qualified worksite outside the classroom and must connect to the student's post-high school goals (High School and Beyond Plan).

Employer: _____ **Job Title:** _____

Duties and Tasks

List some of your responsibilities at your job and/or the skills you need: _____

_____

_____

Skyline High School Qualifying CTE Courses

Check any of the following Career and Technical Education (CTE) courses you have taken and passed OR are currently taking. If you cannot check any of these courses, you do not qualify for Worksite Learning at this time.

- ☐ Accounting
- ☐ Advanced Sports Med
- ☐ Aerospace Manufacturing
- ☐ American Sign Language
- ☐ Animation
- ☐ AP Computer Science Principles
- ☐ Applied Algebra
- ☐ Child Development
- ☐ Criminal Justice
- ☐ Digital Illustration
- ☐ Economics
- ☐ Fashion Design & Merchandising
- ☐ Future Ready
- ☐ Graphic Design
- ☐ Health
- ☐ IB Business Management
- ☐ IB Computer Science
- ☐ IB Economics
- ☐ IB Personal and Professional Skills
- ☐ Intro to Computer Science
- ☐ Intro to CS Python
- ☐ Intro to Engineering
- ☐ Intro to Sports Medicine
- ☐ Mechatronics
- ☐ Personal Finance
- ☐ Police Forensics
- ☐ Sales and Marketing
- ☐ Sports & Entertainment Marketing
- ☐ Teaching Academy
- ☐ TV/Video Production
- ☐ Video Game Design
- ☐ Website Design
- ☐ Yearbook

Qualifying Course

Considering what you learned in the CTE course(s) you checked, which CTE course did you learn something that you can use or continue to learn at your current job?

Course: _____

Describe how the knowledge and skills from the above course connects to your job: _____

_____

_____

Career Goals

Describe how this job will help you meet your career goals as it relates to your high school and beyond plan: _____

_____

_____

Issaquah School District
STEM & CTE

Student Information Sheet

Worksite Learning (WSL)

Qualifying Course

_____

Student Name _____ *Date of Birth* _____

(Must be at least 16 years old to participate.)

High School ☐ Issaquah ☐ Liberty ☐ Skyline ☐ Other _____

Grade level ☐ 9 ☐ 10 ☐ 11 ☐ 12 *Student ID Number* _____

Home Address _____ *City/Zip* _____

Student ISD Email _____ *Preferred Communication* ☐ ISD Email ☐ Canvas

Company Name _____ *Company City* _____

Supervisor Name _____ *Work Experience Type* ☐ Paid ☐ Unpaid

Parent/Guardian Name _____ *Daytime Phone* _____

Daytime Email _____ *Preferred Communication* ☐ Email ☐ Phone

WORKSITE LEARNING COORDINATOR USE ONLY

Documentation Checklist

☐ *WSL Employer Orientation (on file at CTE office)*
Date Completed _____
Employer 2 _____
Employer 3 _____

☐ *WSL Student Information Sheet (this document)*

☐ *WSL Training Agreement*
Date Completed _____
Employer 2 _____
Employer 3 _____

WSL Learning Plan(s)

☐ *1-180 hours*
☐ *181-360 hours*
Date **Learning Plan** *Completed* _____

Registrar Notified

☐ *1-180 hours* *Date* _____
☐ *181-360 hours* *Date* _____

☐ *WSL Student Work Hours Documentation*
Hours reported for FTE _____

ISD Nondiscrimination Statement

The Issaquah School District complies with all applicable federal and state rules and regulations and does not discriminate on the basis of sex, race, creed, religion, color, national origin, age, honorably discharged veteran or military status, sexual orientation including gender expression or identity, the presence of any sensory, mental or physical disability, or the use of a trained dog guide or service animal by a person with a disability in its programs and activities, or employment related matters, and provides equal access to the Boy Scouts and other designated youth groups. The following employees are designated to handle questions and complaints of alleged discrimination: Executive Director of Human Resources, District Title IX Coordinator, Section 504/ADA Coordinator or Compliance Coordinator for 28A.540 and 28A.642 RCW, in writing or by telephone. The Issaquah School District will also take steps to assure that national origin persons who lack English language skills can participate in all educational programs, services and activities.

Training Agreement

Worksite Learning (WSL)

Student Name (print) _____

Student Responsibilities (Failure to comply with any of the following may result in termination from the program)

1. Complete all required forms. WSL hours cannot be counted toward credit until paperwork is completed, signed, and returned.
2. Provide own transportation to and from the job using public transportation or in a legally licensed and insured vehicle.
3. Become familiar with and conform to all student employee regulations and policies set forth by the employer and the coordinator.
4. Abide by the dress code of the learning/training site.
5. Maintain satisfactory grades at school while working.
6. Keep regular attendance at school and at work, and notify the employer of any anticipated absences.
7. Correctly document all hours worked.
8. Notify the Worksite Learning Coordinator within 24 hours if there is a change of work hours or if termination occurs.
9. Understand that the in-school qualifying CTE course is a vital part of the Worksite Learning program. Failure in the course will also result in failure of the work credit.
10. Understand that short and long-term school suspension policies will also apply to the Worksite Learning program.
11. Understand that, if expelled, student will be in violation of the agreement and the agreement will be terminated.

Student Print Name _____ Student Signature _____ Date _____

Parent/Guardian (P/G) Responsibilities (if student is under 18 years old)

1. Assume responsibility for the conduct and safety of the student from the time they leave school until reporting to work, and from the time they leave the work site until returning to school or home. The Issaquah School District assumes no responsibility or liability for student's travel, conduct, or safety once the student leaves school grounds.
2. Encourage the student's active participation, punctuality, attendance, and personal growth in this program.
3. Support this agreement during the student's participation in the work-credit program.

P/G Print Name _____ P/G Signature _____ Date _____

☐ Student is 18 years of age and does not require Parent/Guardian signature.

Employer Responsibilities

Business Name _____

Business Street Address _____ City/Zip _____

Supervisor Phone _____ Supervisor Email _____

1. Comply with state and federal guidelines and regulations concerning health & safety, nondiscrimination, harassment, work rules for minors, and employee rights.
2. Comply with the nondiscrimination statement listed on the back of this agreement.
3. Provide the student employee with the same considerations given to a regular beginning employee (e.g. safety, health, social security, general working conditions, and other regulations of the organization).
4. Adhere to all federal and state wage and hour laws.
5. Monitor the number of hours worked by the student. The maximum working hours must comply with State L&I regulations and are dependent upon the student's ability to work and still maintain satisfactory grades.
6. Notify the coordinator of any problems the student is having on the job when, in the employer's opinion, the existing situation could be detrimental to the student's continued employment.
7. Confer with the coordinator regarding the student's on-the-job performance and complete learning plans & evaluations.
8. Verify student work hours periodically.

Supervisor Print Name _____ Supervisor Signature _____ Date _____

Worksite Learning Coordinator Responsibilities

1. Contact the employer and become acquainted with the workplace supervisor(s), checking in periodically.
2. Become familiar with the nature of the work that the student is expected to perform and assist the student if conflicts arise that may be detrimental to success on the job.
3. Endeavor to resolve any problems that arise from the student's employment to the mutual satisfaction of all parties concerned.
4. Work with the employer to periodically verify the student's hours and complete the learning plans & evaluations.

Worksite Learning Coordinator Signature _____ Date _____

Student Learning Plan and Evaluation
1-180 Hours

For every 180 hours reported, student will be evaluated on professional skills and learning plan objectives set in coordination with the workplace supervisor and worksite learning coordinator.

Evaluation Criteria	*Exceeds*	*Meets*	*Showing Progress*	*Unsatis-factory*	*N/A*
Individual Skills					
• *Make judgments and decisions using appropriate reasoning for a situation*					
• *Be responsible to others and act appropriate to others' interests*					
• *Able to express thoughts and ideas effectively and able to listen and understand oral or written instructions*					
• *Solve problems by identifying issues, brainstorming, and applying possible solutions to the problem*					
• *Able to manage time and complete tasks to satisfaction of supervisor*					
Teamwork Skills					
• *Collaborate with others and work as part of group to complete tasks*					
• *Interact effectively with others, knowing when it is appropriate to listen and appropriate to speak*					
• *Able to adapt to varied roles, job responsibilities, and work schedule*					
• *Interact effectively with others and be respectful and professional*					
• *Work effectively in diverse teams*					
• *When given a task, will take the lead, making sure that the goal has been accomplished*					
• *Be open and responsible to new and diverse ways of accomplishing tasks*					
Employability					
• *Prioritize, plan, and manage work to achieve the intended result*					
• *Use information accurately when dealing with an issue or problem*					
• *Use technology as a tool to research, organize, evaluate, and communicate information*					
• *Deal positively with praise, setbacks, and criticism*					
Attendance and Punctuality					
• *Maintain acceptable attendance and demonstrate dependability*					
• *Alert supervisor if absent or late for work. Plan ahead!*					
Learning Plan Objectives					
#1 *Student abides by workplace safety rules and regulations according to industry standards*					
#2					
#3					

Student signature _____

Parent signature _____

☐ Student is 18 years of age and does not require Parent/Guardian signature.

Employer signature _____

Evaluation Initials

Supervisor _____

WSL Coordinator _____

Student _____

WSL Coordinator _____ *Date complete* _____

Student Learning Plan and Evaluation
181-360 Hours

For every 180 hours reported, student will be evaluated on professional skills and learning plan objectives set in coordination with the workplace supervisor and worksite learning coordinator.

Evaluation Criteria		*Exceeds*	*Meets*	*Showing Progress*	*Unsatis-factory*	*N/A*
Individual Skills						
• *Make judgments and decisions using appropriate reasoning for a situation*						
• *Be responsible to others and act appropriate to others' interests*						
• *Able to express thoughts and ideas effectively and able to listen and understand oral or written instructions*						
• *Solve problems by identifying issues, brainstorming, and applying possible solutions to the problem*						
• *Able to manage time and complete tasks to satisfaction of supervisor*						
Teamwork Skills						
• *Collaborate with others and work as part of group to complete tasks*						
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• *Prioritize, plan, and manage work to achieve the intended result*						
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• *Use technology as a tool to research, organize, evaluate, and communicate information*						
• *Deal positively with praise, setbacks, and criticism*						
Attendance and Punctuality						
• *Maintain acceptable attendance and demonstrate dependability*						
• *Alert supervisor if absent or late for work. Plan ahead!*						
Learning Plan Objectives						
#1	*Student abides by workplace safety rules and regulations according to industry standards*					
#2						
#3						

Student signature _____

Employer signature _____

*WSL Coordinator*_____ *Date complete* _____