

## Worksite Learning Student Learning Agreement

Student Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_  
Career Path \_\_\_\_\_ Career Goal \_\_\_\_\_  
Learning/Training Site \_\_\_\_\_ Supervisor \_\_\_\_\_  
Student Position \_\_\_\_\_  
Start Date \_\_\_\_/\_\_\_\_/\_\_\_\_ ☐ Cooperative work-based learning Experience ☐ Instructional Experience Proposed  
Hours per Week \_\_\_\_\_ Total Hours \_\_\_\_\_

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

1. Keep regular attendance at school and on the job, notifying the employer of any anticipated absences. If the trainee is absent from school, he/she must be absent from work unless other arrangements have been made with the Coordinator
2. Abide by all state, federal, business site, and school rules and regulations
3. Demonstrate honesty, punctuality, cooperation, confidentiality, and respect for others
4. Submit verified documentation of hours at the learning/training site to the WBL Coordinator and complete the necessary forms for school credit purposes as required.
5. Inform the site supervisor and/or WBL Coordinator of any problems, concerns, accidents/injuries immediately
6. Abide by the dress code of the learning/training site

### II. Parent/Guardian Responsibilities:

1. Provide support for the student's active participation, punctuality, and personal growth in the program
2. Assume responsibility and liability for student transportation while traveling to and from the worksite.
3. Complete a release of student and/or medical records (see prequalifications checklist)

### III. Worksite Learning (WBL) Site Responsibilities:

1. Comply with Federal and State Labor and Industry regulations, **as well as state Worksite Learning standards and school district policies**
2. Provide orientation (i.e. safety policies, and procedures) and job specific training
3. Conform to federal laws prohibiting discrimination on the basis of race, color, national origin, sex, or disability
4. Provide a safe working environment and report any student accidents and injuries
5. Consult with the WBL Coordinator concerning the student's learning plan
6. Verify attendance and/or time records and provide feedback regarding performance and skill attainment
7. Maintain liability insurance
8. Supervise students while on business premises and monitor employees who have direct contact with students
9. The student will in no way violate any collective bargaining agreement between the business and regularly scheduled employees.

### IV. School District Representative Responsibilities:

1. Secure all paperwork, including a training plan, before credit and/or grades are issued
2. Inform students of basic worksite safety and minor work laws
3. Consult with the WBL Site Representative to evaluate student performance **as per the student learning plan**
4. Document all accidents and injuries
5. Make regular site visits to monitor student performance

**Each party shall defend, indemnify and hold the other party, its officers, officials, employees and volunteers harmless from any and all claims, injuries, damages, losses or suits including attorney fees, arising out of injuries and damages caused by each party's own negligence**

**The School District as an educational institution and as an employer does not discriminate on the basis of race, religion, ethnicity, national origin, age, disability, sex, marital or veteran status. This is a commitment made by the District in accordance with federal, state and local laws and regulations.**

#### Student

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

Student home address and zip code \_\_\_\_\_

Student home telephone number \_\_\_\_\_

#### Parent/Guardian

Parent/Guardian (print) \_\_\_\_\_ Signature \_\_\_\_\_

Parent/Guardian address and zip code \_\_\_\_\_

Parent/Guardian home telephone \_\_\_\_\_ Parent /Guardian work telephone \_\_\_\_\_

#### Employer

Employer name (print) \_\_\_\_\_ Signature \_\_\_\_\_

Name of business \_\_\_\_\_

Business address and zip code \_\_\_\_\_

Business telephone number \_\_\_\_\_ FAX # \_\_\_\_\_

#### Teacher/Coordinator

Teacher/Coordinator (print) \_\_\_\_\_ Signature \_\_\_\_\_

Name of high school \_\_\_\_\_

Teacher/Coordinator address and zip code \_\_\_\_\_

Teacher/Coordinator telephone number \_\_\_\_\_ FAX# \_\_\_\_\_