





Off-campus Education is a planned learning experience for which credits are granted. It integrates classroom theory and learning experiences at a workplace to enable students to apply and refine the knowledge and skills acquired in the related secondary school course.

**Successful Off-campus Education includes:**

- Completion of HCS3000 "Workplace Safety Systems" (prerequisite for first Off-campus experience);  
or
- Completion of Workplace Readiness 10-4 course (Students enrolled in Knowledge and Employability courses may use Workplace Readiness 10-4 as the prerequisite safety course in lieu of HCS3000: Workplace Safety Systems.)

**Note:** Students must have HCS3000 or Workplace Readiness 10-4 completed **prior** to beginning in their job placement.

- Completion of AGR3000 "Agriculture Safety" (prerequisite for green certificate);
- Completion of HCS3010 "Workplace Safety Practices" (recommended course for RAP);
- Submission of resume and cover letter to the Off-campus Coordinator;

**Note:** Students must submit a completed, up-to-date resume and cover letter to their Off-campus Coordinator **prior** to beginning the job placement.

- Interview skills practice;
- Workplace skill development and enhancement;
- Career opportunities research and familiarity;
- Portfolio development;
- Health and safety issues awareness and understanding your rights as a worker;
- Understanding how the in-school curriculum relates to the world of work.

**Keys to program success:**

- Be on time;
- Be ready to work;
- Bring what you will need with you;
- Be motivated and show initiative;
- Be polite and get along with your co-workers;
- Maintain contact with the employer regarding absences due to illness, holidays, appointments or whatever cause;
- Maintain regular contact with the Off-campus Coordinator and submit required papers in a timely fashion.

# **RESPONSIBILITIES OF PARTICIPANTS**

## **Student, Teacher and Employer/Supervisor**

1. All participants should be aware of the [\*Employment Standards Rules – Youth Employment Laws\*](#) and how they are to be applied to students under the age of 18 years.
2. The student shall conduct themselves in an appropriate manner, exhibiting good work ethic and citizenship. They will make the employer aware of any special health issues that might impact on the placement (e.g. medication requirements).
3. The employer is asked to convey any concerns regarding the student to the Off-campus Coordinator.
4. The student shall abide by the regulations and policies of the employer and the School Board regarding attendance, dress code, safety standards, and general decorum.
5. The *Placement Safety Plan* must be completed by the student and/or Off-campus Coordinator and employer prior to the first day of work by the student **at the work site**.
6. The employer is responsible for acquainting the student with common safety hazards in the workplace, discussing safety regulations and procedures, and providing required safety training prior to the use of any equipment.
7. The student shall follow all safety procedures and wear personal protective equipment as required.
8. In the event of an absence caused by illness or emergency, the student must notify the employer and the school as early as possible. Records of absences must be kept by the student and the employer.
9. Employers should be familiar with the [\*Workers' Compensation Act\*](#) for it applies to students registered in off-campus education programming. Workers' Compensation Board (WCB) insurance starts when a work agreement has been signed and a student begins a placement in an off-campus education program. In all cases of injury, the student shall:
  - a. Promptly obtain first aid;
  - b. Notify the workplace supervisor and the Off-campus Coordinator immediately, even if it is a minor injury;
  - c. Explain to the doctor that this may be a Workers' Compensation Board (WCB) claim and identify oneself as an employee of the Government of Alberta if medical attention is required.
10. The Off-campus Coordinator will arrange for in-school related instruction (this may be offered via virtual education) and monitor the student at the work site as required by the Alberta Education [\*Off-campus Education Handbook \(2019\)\*](#) guidelines.
11. The employer assumes the responsibility of providing the student with the type of training and experiences outlined in the student's *Learning Plan*.
12. The *Learning Plan* should not be changed, interrupted or terminated without prior consultation between the student, employer and Off-campus Coordinator. However, the employer has the right to terminate the contract with the student and the school at any time.
13. The student shall submit timesheets regularly as required by the Off-campus Coordinator.
14. The school may issue the student credit(s) for the entire period of training successfully completed- usually 1 high school credit for each 25 hours worked.

15. Note that in cases where there is a concern about the transmission of infectious diseases, the employer has the right to require testing or vaccination as a condition of placement.

## **DRIVING**

1. It is the policy of Aspen View Public Schools that all students who use their own vehicles or the vehicles of others to provide transportation in connection with the work placement **DO SO AT THEIR OWN RISK, INDEPENDENT OF THE BOARD OF TRUSTEES.**
2. Because of risks involved in student driving, we discourage student driving at placement businesses unless it is specified in the student's *Learning Plan*. When driving is a component of the learning experience on the job, the employer **MUST** assume liability and, therefore, it is the responsibility of the employer to ensure that adequate insurance is in place for the company or customer vehicle/equipment and/or property used by the student.
3. If driving a vehicle/equipment is **NOT** part of the work placement experience (as specified in the *Learning Plan*), students will **NOT** be covered by the school board's liability insurance.
4. In the case of a student driving their own vehicle on company-related business where driving is a component of the learning experience on the job (as is specified in the *Learning Plan*), then the primary insurer is the student's **OWN** insurance.

## **WORKERS' COMPENSATION BOARD**

1. As a result of *Workers' Compensation Regulation 325/2002*, Section 7(1)(e), the *Workers' Compensation Act* applies to students registered in off-campus education programs. Section 153(3) of the *Workers' Compensation Act* states that, for the purposes of insurance coverage, these students will be considered to be workers employed by the Government of Alberta. This may be important for employers to consider prior to becoming involved in off-campus education programs, since it does affect procedures for reporting student injuries.
2. Students are not covered by the Workers' Compensation Board (WCB) for classroom or shop work as elementary or secondary school teachers' aides **OR** when traveling to or from the training station.

## **EVALUATION and ASSESSMENT**

Formative and summative evaluation and assessment of the student's achievement is the responsibility of the school; however, it is agreed that data will be collected from the employer, the off-campus coordinator and any other off-campus coordinator involved in monitoring the student's progress.

- a. Workplace Assessment and Evaluation: 60%
- b. Workplace/Course Documentation 40%

**NOTE:** No student will be granted credits based solely on a worksite appraisal. All required documents in must be submitted.

# LEARNING PLAN

Students will complete this plan in discussion with their employer.

This document will be a work in progress throughout the placement.

Any changes made to the Learning Plan must be shared with the Off-campus Coordinator prior to the student engaging in the proposed change.

## Part A

Student: \_\_\_\_\_ Contact Phone #: \_\_\_\_\_

In-School Course: \_\_\_\_\_ Occupation/Job Title: \_\_\_\_\_  
(Work Experience-Registered Apprenticeship-Green Certificate-Internship)

Off-campus Coordinator: \_\_\_\_\_

School: \_\_\_\_\_

Principal: \_\_\_\_\_

Company Name: \_\_\_\_\_ Contact Phone #: \_\_\_\_\_

Address: \_\_\_\_\_

Workplace Supervisor: \_\_\_\_\_ Contact Phone #: \_\_\_\_\_

Workplace Supervisor Email: \_\_\_\_\_

<b>Prerequisite Courses:</b>		
HCS3000	<input type="checkbox"/> yes <input type="checkbox"/> no	Date Completed:
Workplace Readiness 10-4	<input type="checkbox"/> yes <input type="checkbox"/> no	Date Completed:
AGR3000	<input type="checkbox"/> yes <input type="checkbox"/> no	Date Completed:
<b>Related Courses:</b>		
HCS3010 (RAP)	<input type="checkbox"/> yes <input type="checkbox"/> no	Date Completed:
CTR1010	<input type="checkbox"/> yes <input type="checkbox"/> no	Date Completed:
Is this placement in an apprenticeable trade?	<input type="checkbox"/> yes <input type="checkbox"/> no	
Is the student a registered apprentice?	<input type="checkbox"/> yes <input type="checkbox"/> no	
Special Accommodations/Strategies/Resources:	<input type="checkbox"/> IPP	

**Part B**

**Goals for the Semester**

Student, list three goals that you have for your placement:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**Student Duties and Responsibilities**

Employer, give a detailed description of the duties this student will be responsible for at this worksite.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

Employer, list the demonstrated workplace skills, attitudes and understanding that enabled the student to be hired for this position:

Workplace skills (soft and/or hard skills)
Attitudes:
Understanding:

Student, what job-related training and/or safety training have you completed prior to starting this job?

1. \_\_\_\_\_
2. \_\_\_\_\_

Employer, what special training will the student complete in the next \_\_\_\_75 \_\_\_\_ 125 \_\_\_\_250 hours of work?

Training	Date Completed
75 hours	
125 hours	
250 hours	

Employer, what workplace skills, attitudes and understanding should the student develop or improve during the next \_\_\_\_75 \_\_\_\_ 125 \_\_\_\_250 hours of work?

Training	Date Completed
75 hours	
125 hours	
250 hours	

Notes:

1. If the primary job duties change significantly during the work experience placement, the Off-campus Coordinator must be informed so that the Learning Plan can be updated.
2. To facilitate planning, students should be provided with a one- or two-week work schedule.

Supervisor's Name (printed): \_\_\_\_\_

Supervisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Off-campus Coordinator's Signature: \_\_\_\_\_ Date: \_\_\_\_\_



# WORK SITE INSPECTION FORM

School: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ School Year: \_\_\_\_\_

Off-campus Teacher: \_\_\_\_\_ Email: \_\_\_\_\_

Telephone No.: \_\_\_\_\_

1. The work site inspection must occur prior to student placement.
2. A work site—the specific off-campus location at which the student is involved in off-campus learning activities (Work Study Programming, Work Experience, Career Internship, Green Certificate Program, Workplace Readiness/Practicum, RAP)—requires inspection and annual approval by the off-campus teacher. Should an accident or injury occur, the work site requires a subsequent inspection before reapproval (see the *Off-campus Education Handbook* for details).
3. Parental or guardian consent shall be obtained on the student's behalf, a student–employer agreement shall be signed by both parties and the parents/guardians of underage students, and this inspection record shall be on file at the school attended by the student and copies sent before the student is placed at the work site.
4. Students and parents/guardians signing the Work Agreement are considered to have signed the Workers' Compensation Board Deeming Order Application for workers' compensation coverage.

## Work site

<p>A. Company Name: _____ Company Address: _____ Postal Code: _____ Company Contact Person: _____ Telephone: _____ Cell: _____ Type of Business: _____ More than one work site involved: Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, complete Box B.</p>	<p>B. Work Site Location(s) _____ Supervisor (onsite): _____ Telephone: _____ Email: _____  More than one supervisor involved (please list all): _____ _____ _____</p>
-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Number of students to be placed at work site: \_\_\_\_\_

Does the employer or job have a minimum age requirement for employees at work site? Yes  No

Driver's license required: Yes  No

### Work Site Approval for Specified Programs

Work Study Programming  Work Experience  Career Internship

Green Certificate Program  Workplace Readiness/Practicum  RAP

Approved  Not Approved  (provide documentation)

Inspecting Off-campus Teacher (please print): \_\_\_\_\_

Date: \_\_\_\_\_ Signed: \_\_\_\_\_

Principal/Assistant Principal (please print): \_\_\_\_\_

Date: \_\_\_\_\_ Signed: \_\_\_\_\_



# **PLACEMENT SAFETY PLAN**

This safety plan is to be completed by employer in conjunction with the student prior to the student's first day of work.

It is the mandate of Alberta Education and the Board of Trustees of Aspen View Public Schools, that all placements are assessed for their learning value and to ensure the safety of students in the workplace.

Each employer assumes the responsibility for providing a safe working environment with proper industrial health and safety standards procedures. Although health and safety is covered generally during preplacement lessons in school, job specific training must be included as part of the student's orientation to the work site. The employer/supervisor is responsible for training the student in all aspects of health and safety related to the duties they will be performing.

## **INSTRUCTIONS:**

The student will discuss the safety plan with their placement supervisor. The completed form must be submitted to the Off-campus Coordinator prior to the student working at the placement.

It is the responsibility of the Off-campus Coordinator and the placement supervisor to review the information to ensure the provision of an appropriate learning environment that meets the needs of the student.

## **PART A: PLACEMENT OVERVIEW**

1. Type of off-campus education placement: (Please check ✓)

construction  office  daycare  manufacturing  food industry  oil & gas industry

health sciences  school  agriculture  transportation  retail  other \_\_\_\_\_

2. Area where student will be working: (Please check ✓)

office  plant  shop  store  classroom  farm  other \_\_\_\_\_

3. Brief job description for the placement.

---

---

4. List any specific job requirements (heavy lifting, fine motor skills, etc) or restrictions (e.g. clothing, piercing, etc.) that are unique to the placement. Explain.

---

---

**PART B: PLACEMENT SAFETY PROCEDURES**

- 1. Is there a health and safety committee at the workplace?     yes    no
- 2. Are there written health and safety rules or regulations?     yes    no
- 3. Name and job title of the person responsible for providing health and safety training.  
Name: \_\_\_\_\_    Job Title: \_\_\_\_\_

- 4. Name and job title of the person that accidents are reported to:  
Name: \_\_\_\_\_    Job Title: \_\_\_\_\_

- 5. Where can health and safety information be accessed?  
\_\_\_\_\_

- 6. Have the workplace emergency procedures been reviewed with the student?    yes    no

**Fire**

Evacuation procedure: \_\_\_\_\_

Co-worker is on fire: \_\_\_\_\_

Student discovers fire: \_\_\_\_\_

**Personal Injury**

Student is injured: \_\_\_\_\_

Co-worker is injured: \_\_\_\_\_

**Chemical Spill**

Student spills something: \_\_\_\_\_

Student comes across something that has spilled (person that this is reported to): \_\_\_\_\_

- 7. Where are the first aid supplies kept? \_\_\_\_\_

- 8. Is there personal protective equipment?    yes    no

If yes, list any personal protective equipment required:

\_\_\_\_\_

If yes, is the personal protective equipment provided by the employer?    yes    no

If not provided, please provide a suggestion as to where the PPE can be purchased:

\_\_\_\_\_

If not provided, please provide the specs of the appropriate PPE:

\_\_\_\_\_

If yes, has the supervisor provided training on proper use of the equipment?    yes    no

**PART C: SPECIFIC WORKPLACE CONDITIONS**

All or some of the following conditions may apply to the placement. Please indicate (✓) if the issue identified is applicable or not applicable to the placement. If it is applicable, the employer must provide appropriate training prior to the performance of the activity.

**Chemical handling:**    Applicable    Not Applicable

- List the hazardous substances that students will work with:

\_\_\_\_\_

- Chemical substances are identified with a WHMIS supplier or workplace label?     yes     no
- Where are Material Safety Data Sheets kept?

\_\_\_\_\_

**Mobile equipment hazards:**

(i.e. forklift, tractor, automobile, etc.)

- Type of equipment the student will be using:

\_\_\_\_\_

Please note: If students are permitted to drive ANY motorized vehicles (ATV, golf cart, tractor, etc.), the owner's automobile insurance is the primary coverage. The school board's insurance does not cover the student driving ANY vehicles.

**Mechanical machinery:**    Applicable    Not Applicable

(i.e. CNC lathe, drill press, lifting devices, etc.)

- Type of equipment: \_\_\_\_\_
- Does the equipment the student will use have a safety guard?     yes     no     N/A

**Biological hazards:**    Applicable    Not Applicable

(i.e. animal, human body fluids, infectious diseases, uncooked foods, etc.)

- Type of biological hazards: \_\_\_\_\_
- Is the student required to receive any immunization?     yes     no     N/A

If yes, check (✓) immunization required:    Hepatitis    Tuberculosis    Other \_\_\_\_\_

If immunizations are required, it will be the responsibility of the student/parent to cover any costs.

Individual employers may require a drivers abstract, criminal record check, child welfare check and drug testing.

**Unusual conditions:**    Applicable    Not Applicable

(i.e. working: at heights, in confined spaces, in a flammable or explosive environment, with extreme dust or other contaminants, on ladders, etc):

\_\_\_\_\_

Other (specify): \_\_\_\_\_

**PART D: WORKPLACE ENVIRONMENT**

Aspen View Public Schools requires that students work in an environment that is free from discrimination, violence and expressions of hate.

The Board recognizes that some organizations may not have a harassment policy.

Does your organization have a formal harassment policy?  yes  no

If yes, will you be sharing this policy with the student?  yes  no

This safety plan has been reviewed by Off-campus Coordinator with the student  yes \_\_\_\_\_  
(Off-campus Coordinator Initials)

See the following websites for specific health and safety information:

<https://safegen.ca/>  
<https://www.youracsa.ca/>

# WORK AGREEMENT

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

## BETWEEN

A. Name of Student: \_\_\_\_\_  
(herein called "the student")

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Off-campus Coordinator: \_\_\_\_\_

B. Name of Employer: \_\_\_\_\_ Telephone: \_\_\_\_\_  
(herein called "the employer")

C. Company Address: \_\_\_\_\_

## WHEREAS

1. The school board has approved an off-campus education program for students in its school pursuant to section 39 of the *Education Act*.
2. The employer and the student have agreed to participate in the said program on the terms and conditions herein set forth.

## WITNESSETH

### EFFECTIVE PERIOD AND HOURS

1. The parties agree the off-campus education employment contemplated in this agreement shall start on \_\_\_\_\_, 20\_\_\_\_, and end on \_\_\_\_\_, 20\_\_\_\_.
2. The student's standard hours of work for this off-campus employment shall be no more than \_\_\_\_ hours per week, distributed as follows:

Day	Start Time	End time	*Maximum Hours for students are set out on page 19 of the Alberta Education <a href="#"><i>Off-campus Education Handbook (2019)</i></a> .
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			

\* Where a student is required to work outside of the recommended maximums, additional health and safety parameters must be outlined on the other side of this work agreement.

### 3. Termination

Notwithstanding anything herein contained to the contrary, any party written hereto may, with or without cause, summarily terminate by giving written notice of termination to the parties to this agreement.

### 4. Supervision

During the hours of employment herein set forth, the student shall be under the direct supervision and control of the employer, provided that the employer shall at all times permit the school authority or its representatives access to the employment site and the student.

### 5. Evaluation

The employer shall, at the request of the school authority or its representatives, evaluate the student in the performance of their duties hereunder and report such evaluation on a form from time to time provided to the employer by the school authority.

**6. Full-time Employee Tenure**

The employer agrees that the employment of the student hereunder shall in no way affect the job security of any other employee of the employer, nor the employer’s hiring practices with regard to full-time employees.

**7. Insurance**

Pursuant to the *Workers’ Compensation Act* (W-15, R.S.A. 2000), and regulations or orders-in-council made thereunder, the student participating in this program is deemed to be a worker of the Alberta Government for the purpose of workers’ compensation.

**8. Signatures:**

Employer	Student
Off-campus Coordinator	Parent or Guardian of Student

**Additional Health and Safety Parameters for Students Working Beyond Recommended Hours**

a) The parties acknowledge and agree that the hours set out in subsection (b) are beyond the recommended maximums outlined in the Alberta Education [Off-campus Education Handbook \(2019\)](#) document. The board and employer represent and warrant that the following additional health and safety parameters are in place to effectively support the student:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

b) Approval of Student Schedules Outside of Recommended Hours of Work

Based on sufficient due diligence, the Off-campus Coordinator approves of the student working outside of the recommend hours of work:

Approved  Not Approved

Off-campus Coordinator (please print full name): \_\_\_\_\_

Date: \_\_\_\_\_ Signed: \_\_\_\_\_



# RELAUNCH PLAN – TEMPLATE

---

To open your service or setting to the public, it is recommended you complete a plan to reduce the risk of transmission of COVID-19 among the attendees of your location. This optional template can support you in creating your plan. It is recommended your plan be posted where the public can see it, such as in your location or on a public-facing website.

The template includes considerations to help guide you as you plan to open. This should be completed using Alberta’s COVID-19 General Relaunch Guidance, which provides general guidance applicable to all sectors; as well as sector-specific guidelines available on Alberta Biz Connect and any additional requirements of your business or sector association.

---

## Distancing Measures

**Considerations:** How will you ensure people maintain 2 metres between each other? Do you need to maintain directional traffic flow? How would you limit congregating (e.g., in break rooms, communal spaces, rest areas, etc.)? How will you limit the overall number of people in your space? Refer to the Personal Protective Equipment (PPE) section to mitigate the risk of transmission when 2 metre distancing cannot be maintained.

---

## Cleaning/Disinfection

**Considerations:** How will cleaning on high touch surfaces be maintained in your location (e.g., bathroom, chairs, doorknobs, break rooms)? How will you train and ensure workers or volunteers keep equipment clean? If you are a business, how will work surfaces, order screens, debit machines and cash registers be cleaned?

What cleaner are you using? What disinfectant are you using (do they have a DIN or NPN)? How long do you have to keep the disinfectant on the surface for it to be effective?

## Screening for Symptoms

**Considerations:** How will you be aware of symptoms in staff, customers, congregants or volunteers, such as fever, sore throat, cough, runny nose or difficulty breathing? Have you provided education or communication of self-monitoring of symptoms? Have you identified a space where staff or volunteers can be separated from others if they develop symptoms? Have you considered what you would do if you see increased absenteeism due to illness or isolation requirements? Have you considered absenteeism policies that encourage staff members or volunteers to stay home when ill, in quarantine (self-isolation), or if they are taking care of children or someone who is ill? Are you maintaining a log of staff or volunteer attendance? What is your response plan for staff who come to work with symptoms?

---

## Personal Protective Equipment (PPE)

**Considerations:** How will you promote PPE use (e.g., masks or gloves) when people are unable to be 2 metres apart? If 2 metres cannot be maintained and PPE is necessary, where would you obtain it? Have you considered installing physical barriers (e.g., acrylic plastic window or high-walled cubicle) to reduce exposure when 2-metre distancing is hard to maintain?

---

## Responsibilities

**Considerations:** Who will be responsible for ensuring staff, customers, congregants and volunteers are following your precautions? Have you updated contact information for staff and volunteers so they can be notified in the event of a known exposure? What would your approach be if you had to manage a situation where there was apparent non-compliance with your plans/direction?

## **SIGNATURES FORM**

**Student:**

I have read the *Off-campus Education Student Handbook* and agree to its terms as indicated by my signature below.

---

Student Signature

---

Date

**Parent/Guardian:**

I understand that my child, \_\_\_\_\_, is enrolling in a Work Experience/RAP program, or taking part in another Work Place activity which will involve substantial time in the community. I am aware that immunization, tests, and/or precautions are advised/mandatory for certain placements as outlined in the attached pages. I understand that my child must adhere to the standards outlined in the *Off-campus Education Student Handbook*.

I understand that there may be inherent risks in any experiential learning opportunity in the community, and that Aspen View Public Schools and its staff cannot be held responsible or liable for any injury to a student, or property loss or damage which arises as a result of activities in the placement.

I give permission for my child to participate in any field trip related to the program.

In accordance with the *Alberta Freedom of Information and Protection of Privacy Act* and under the authority of the Alberta School Act, I hereby grant my consent to the use and publication of photographs, names, name of school attended, and achievements of my child as part of the program.

I understand that I am responsible for providing appropriate insurance if it is necessary for my child to drive from their work site.

---

Parent/Guardian Signature

---

Date

**Employer:**

I have read the *Off-campus Education Student Handbook* and am aware of my responsibilities in having a Work Experience/RAP student or student on another Work Place activity in my workplace.

---

Employer/Work Site Supervisor Signature

---

Date

**School:**

---

Principal/Off-campus Coordinator Signature

---

Date

# **STUDENT JOB PLACEMENT REFLECTION**

Please describe your experience at your job placement as outlined below:

1. Explain where you worked and for whom:
2. Explain whether it was paid work or not:
3. Explain when you performed your work assignment (ex. Block 1-4, Period 1-8, after school, summer, etc.):
4. List the tasks for which you were responsible:
5. Describe the working conditions at this site:
6. Explain your relationship with other staff:
7. Describe the education required for various jobs at this site:
8. Explain the most important thing you learned in this job:
9. Describe the things you like the most and least about this job and give reasons for your choices: Most:  Least:
10. Comment on the degree to which this job was a worthwhile learning experience and explain your decision:
11. Explain what role this job played in your career plan or your career investigation:
12. Other comments about the job placement:

# EMPLOYER EVALUATION OF STUDENT

Student

Worksite

Date

Note to Employer:  
Evaluate this student as you would a novice worker in your employ.  
If the skill is not applicable to this job placement, initial in the N/A box.

## A. Personal qualities and work habits

	Employability Skills	Excellent (Exceeds job requirements) 5	Proficient (Meets job requirements) 4	Adequate (Meets most job requirements) 3	Limited (Meets minimum job requirements) 2	Not Yet Demonstrated (Did not meet job requirements) 1	Not Applicable (N/A)
1	Quality of work	The student consistently has high quality work	The student usually has high quality work	The student sometimes has high quality work	The student rarely has high quality work	The student never has high quality work	
2	Ability to work without supervision	The student consistently demonstrates the ability to work without supervision	The student usually demonstrates the ability to work without supervision	The student sometimes demonstrates the ability to work without supervision	The student rarely demonstrates the ability to work without supervision	The student never demonstrates the ability to work without supervision	
3	Knowledge of job	The student consistently demonstrates knowledge of the job	The student usually demonstrates knowledge of the job	The student sometimes demonstrates knowledge of the job	The student rarely demonstrates knowledge of the job	The student never demonstrates knowledge of the job	
4	Cooperation	The student is consistently cooperative	The student is usually cooperative	The student is sometimes cooperative	The student is rarely cooperative	The student is never cooperative	
5	Attendance	The student consistently attends	The student usually attends	The student sometimes attends	The student rarely attends	The student never attends	
6	Punctual	The student is consistently punctual	The student is usually punctual	The student is sometimes punctual	The student is rarely punctual	The student is never punctual	
7	Ability to work well with others, cooperative, a team player	The student consistently works well with others	The student usually works well with others	The student sometimes works well with others	The student rarely works well with others	The student never works well with others	
8	Leadership	The student consistently demonstrates leadership	The student usually demonstrates leadership	The student sometimes demonstrates leadership	The student rarely demonstrates leadership	The student never demonstrates leadership	
9	Support to superiors	The student consistently provides support to superiors	The student usually provides support to superiors	The student sometimes provides support to superiors	The student rarely provides support to superiors	The student never provides support to superiors	

10	<b>Client / customer service</b>	The student consistently provides quality client/customer service	The student usually provides quality client/customer service	The student sometimes provides quality client/customer service	The student rarely provides quality client/customer service	The student never provides quality client/customer service	
11	<b>Appropriate grooming and dress</b>	The student is consistently appropriately groomed and dressed	The student is usually appropriately groomed and dressed	The student is sometimes appropriately groomed and dressed	The student is rarely appropriately groomed and dressed	The student is never appropriately groomed and dressed	
12	<b>Verbal communication</b>	The student communicates effectively with an engaging and confident tone	The student communicates clearly with a well-considered tone	The student communicates sufficiently with an appropriate tone	The student's communication is incomplete and/or has an ineffective tone	The student will not communicate verbally	
13	<b>Written communication</b>	The student's writing demonstrates confident control of correct sentence construction, usage, grammar, and mechanics	The student's writing demonstrates competent control of correct sentence construction, usage, grammar, and mechanics	The student's writing demonstrates control of the basics of correct sentence construction, usage, grammar, and mechanics	The student's writing demonstrates faltering control of correct sentence construction, usage, grammar, and mechanics	The student will not communicate in writing	
14	<b>Willingness to learn</b>	The student consistently demonstrates a willingness to learn	The student usually demonstrates a willingness to learn	The student sometimes demonstrates a willingness to learn	The student rarely demonstrates a willingness to learn	The student never demonstrates a willingness to learn	
15	<b>Self-confidence</b>	The student consistently demonstrates self-confidence	The student usually demonstrates self-confidence	The student sometimes demonstrates self-confidence	The student rarely demonstrates self-confidence	The student never demonstrates self-confidence	
16	<b>Ability to set and obtain goals</b>	The student consistently sets goals and obtains them	The student usually sets goals and obtains them	The student sometimes sets goals and sometimes obtains them	The student rarely sets goals and rarely obtains them	The student never sets goals	
17	<b>Acceptance of responsibility</b>	The student consistently accepts responsibility	The student usually accepts responsibility	The student sometimes accepts responsibility	The student rarely accepts responsibility	The student never accepts responsibility	
18	<b>Accountability for actions</b>	The student is consistently accountable for their actions	The student is usually accountable for their actions	The student is sometimes accountable for their actions	The student is rarely accountable for their actions	The student is never accountable for their actions	
19	<b>Personal ethics (honesty, etc.)</b>	The student consistently demonstrates personal ethics	The student usually demonstrates personal ethics	The student sometimes demonstrates personal ethics	The student rarely demonstrates personal ethics	The student never demonstrates personal ethics	
20	<b>Initiative</b>	The student consistently takes initiative	The student usually takes initiative	The student sometimes takes initiative	The student rarely takes initiative	The student never takes initiative	
21	<b>Ability to think critically, reasoning ability, judgement</b>	The student consistently demonstrates the ability to think critically	The student usually demonstrates the ability to think critically	The student sometimes demonstrates the ability to think critically	The student rarely demonstrates the ability to think critically	The student never demonstrates the ability to think critically	
22	<b>Ability to organize</b>	The student is consistently organized	The student is usually organized	The student is sometimes organized	The student is rarely organized	The student is never organized	
23	<b>Effective technology use</b>	The student consistently uses technology effectively	The student usually uses technology effectively	The student sometimes uses technology effectively	The student rarely uses technology effectively	The student never uses technology effectively	



D. General comments

---

Supervisor (please print)

---

Signature

---

Date

Has the employer discussed this report with the student?  yes  no

Has the Off-campus Coordinator discussed this report with the student?  yes  no



# WORK EXPERIENCE MONTHLY TIME SHEET

Name: \_\_\_\_\_ Month/Year: \_\_\_\_\_

Employer: \_\_\_\_\_ Position: \_\_\_\_\_

Date	Weekday	Time In	Time Out	Total Hours / Minutes	Accumulated Hours	Employer's Signature
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
21						
22						
23						
24						
25						
26						
27						
28						
29						
30						
31						

