WEE Coordinator and Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**WORK EXPERIENCE EDUCATION PROGRAM**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_

 NAME OF HIGH SCHOOL NAME OF STUDENT S.S. #

The major purpose of this program is to provide valuable work experience for students. This agreement is made to show responsibilities of the parties concerned; name, student (or trainee), parent or guardian, employer, and work experience coordinator.

**STUDENT WILL:**

1. Enter the program to learn as much as possible about job information, skills, and attitude
2. keep regular required attendance
3. Complete and return all forms and reports when due
4. Consult the work experience coordinator before quitting or changing jobs
5. Attend the related instruction classes and complete all assignments

**PARENT OR GUARDIAN WILL:**

1. Authorize student’s enrollment
2. Assist the student in complying with the above statements for which he/she is responsible
3. Give permission for students 16 and 17 to work between 10:00 p.m. and 12:30 a.m. when necessary

**WORK EXPERIENCE COORDINATOR WILL:**

1. Make periodic visits to place of employment
2. Provide work experience class instruction
3. Assist student to improve his/her job performance and to help him/her solve job related problems
4. Assign a grade and grant credit based upon: a) successful job performance; b) completion of all related instruction assignments; and c) prompt submittal of all forms and reports
5. Award up to 10 credits per semester in 11th and/or 12th grade

**EMPLOYER WILL:**

1. Provide a continuing job, reserving the right to laminate employment for just cause
2. Pay at least the minimum wage with proper deductions
3. Retain a copy of a valid work permit (necessary for all students under 18 years of age).
4. Ensure responsible supervision of the working student in order that he/she may obtain maximum educational and occupational experience from the job
5. Adhere to all federal and state regulations employment child labor laws, and other applicable regulations
6. Prove, as required by law, worker’s compensation for all students receiving pay for work. California State Educational Code No. 5995
7. Periodically evaluate student’s progress
8. Describe student’s five most important job duties:

□ A) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

□ B) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

□ C) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

□ D) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

□ E) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Put an “X” in the boxes in front of the two job duties listed above when improvement is needed (if applicable).
2. Describe two new job duties that should be learned for a raise or a promotion (if applicable):
	* 1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
		2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**NON-DISCRIMINATION POLICY**: The Julian Union School District shall permit no discrimination based on race, color, religion, sex, age, handicap, or national origin in any of its employment policies, programs, or practices.

X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_/\_\_\_\_/\_\_\_\_ X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Employer’s Signature Phone Date Student’s Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Name of Employer’s Place of Business Parent or Guardian’s Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Address of Employer’s Business Coordinator’s Signature and Phone