**WORK EXPERIENCE**

**INFORMATION FOR STUDENTS**

* Work Experience courses are time based, 25 hours per credit. Students must work a minimum 3 credits.
* Students may get 10 credits in Work Experience 35 without taking Work Experience 15 or 25. This can count for the additional 30 level credits required for a diploma.
* Students are required to visit employers in order to find a suitable work site. The Work Experience Coordinator may assist the student in his/her job search.

**Students are advised to work a maximum of 8-10 hours per week.**

**Ask your employer for a two-week work schedule.**

* Students are required to get the prospective employer to fill out and sign the Student Learning Plan. This sheet must be brought to the Work Experience office with the Work Experience Education Agreement.
* Students must get parent/guardian (if under age 18) and employer signatures on the Agreement and **MUST RETURN THE AGREEMENT TO THE WORK EXPERIENCE COORDINATOR BEFORE THE START OF WORKING OR YOUR HOURS WORKED WILL NOT COUNT.**
* Students are allowed to work any day of the week between 7:00 a.m. and 10:00 p.m.
* Students will fill out time sheets, which must be signed at work and turned in to the Work Experience office every week, second week, or at the end of every month, as requested by your Work Experience Coordinator. These timesheets count towards the final evaluation.

**IF YOU ARE ILL OR HAVE TO MISS WORK, PLEASE PHONE YOUR EMPLOYER AS YOU WOULD WITH A REGULAR JOB!!!**

**What Are My Responsibilities**

**As A Work Experience Student?**

You are expected to do the following things:

1. Enroll in Work Experience for the purpose of gaining an educational experience.
2. Promptly complete all required documentation - application, student learning plan, Work Experience Education Agreement and timesheets.
3. If possible, apply for a Social Insurance Number if you do not already have one (contact Employment Insurance office).
4. Represent yourself and your school favorably and in a businesslike manner, remembering that you are in an employer-employee situation.
5. Report to the job on time and maintain the hours in the Agreement, observing company regulations with respect to coffee and lunch breaks.
6. Contact the employer immediately, by telephone, in the case of an unavoidable absence, understanding that this is not only a normal courtesy but it is necessary to allow for the rescheduling of work.
7. Work cooperatively with supervisors and fellow employees in pursuing the employer's objectives.
8. Show initiative by seeking work when you have completed an assigned task(s).
9. Work steadily and carefully, asking for direction as required.
10. Respect the confidential nature of information that comes your way and do not repeat it or gossip to school friends, teachers, parents or other persons.
11. Report immediately to employer-supervisor if you encounter problems or difficulties on the job.
12. Report immediately to your Work Experience Coordinator, if you encounter problems you cannot resolve your employer-supervisor.
13. Exercise proper use of material and equipment as instructed by your employer.
14. Conduct yourself in accordance with the safety practice spelled out by your employer and by the Occupational Health and Safety Regulations.
15. Conduct yourself in a courteous and acceptable manner - language, use of courtesy titles, hair, personal hygiene.
16. Dress appropriately for the job, including safety boots, overalls, etc. if required.
17. Thank the employer and staff for their time and assistance in providing this experience for you.

**Peace River High School**

**STUDENT INFORMATION FORM**

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

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please check the appropriate box (boxes) that apply to you:

**Credits for work experience can not be awarded retroactively, only for new hours, new work, new learning.**

□ I am currently **employed in a paid position** and would like to know if my present employment would qualify for Work Experience credits.

□ I am looking for an **unpaid volunteer position** and would like to have the volunteer employment qualify for Work Experience credits.

**Note:**

If you are currently in a paid or volunteer position, please complete the following information:

Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postal Code\_\_\_\_\_\_\_\_\_\_\_\_

Supervisor/Manager Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Credits to date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ □ Do not know

2. What safety courses have you taken either in school or out of school?

□ First Aid/CPR

□ WHMIS

□ Safety Training

□ Other (please identify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Extra-curricular activities including interests/hobbies:

□ In-school \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

□ Out-of-school \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. List your past employment experience(s):

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

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

5. Have you done work experience previously?

□ No

□ Yes

Where did you work?

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

6. Do you have a valid driver’s license? □ No □ Yes

Do you have access to a vehicle for work? □ No □ Yes

7. Career Goal: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

8. Next career step:

□ University □ College □ Trades □ Work

**For Work Experience Coordinator Only:**

Placement Approved by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Agreement Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Experience Level: 15 25 35

Registered Credits: 3 5 10 HCS 3000 Job Safety: Completed Assigned

**Peace River High School**

**PARENTAL CONSENT FORM**

**For Work Experience**

Dear Parent/Guardian:

Your son/daughter has requested to participate in the Work Experience Program at our school. Alberta Education requires each student participating in the program have his or her parent or guardian sign a consent form. Please complete the form below and return it to:

James Pobuda

Work Experience Coordinator

Peace River High School

If you have any questions or concerns, please contact me at the school @ 780 624-4221 or e-mail [pobudaj@prsd.ab.ca](mailto:pobudaj@prsd.ab.ca) .

Thank you for your cooperation.

|  |  |
| --- | --- |
| **Student’s Name** |  |
| **Parent/Guardian Name**  ***(please print)*** |  |
| **Address** |  |
| **Phone (Residence)** |  |
| **Phone (Business)** |  |

I hereby consent to the above-named student being placed in a registered worksite/station for the purpose of Work Experience.

I understand that:

1. The school or the board shall not be held responsible for the student’s transportation to and from the work site.

2. It is the employer’s decision to provide remuneration for duties performed.

3. The student will be expected to:

a) be prompt and in regular attendance at work,

b) conform to company rules and regulations,

c) accept direction and assessments from authorized supervising personnel.

4. Students may be withdrawn from a station at the request of the employer, by notice to their school’s Work Experience Coordinator.

5. Students may be withdrawn from the Work Experience program at the discretion of the Work Experience Coordinator.

Parent/Guardian

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