Job Shadowing Training Agreement

Student's Name:		Birth Date:	Age:	
			Email:	
		Telephone:	Cell Phone:	
			Cell Phone:	
			ool System:	
			Telephone:	
			phone:	
			Date of Job Shadowing:	
1. 2. 3. 4.	Approves and agrees that Encourages the student to Assumes responsibility for Responsible for transport not provided by school symbols the school, school	the student may participate in the job effectively carry out the requirement the conduct and attendance of the ation arrangements for the student stem) and will be responsible for any	nts and all components of the program. student. to and from the job shadow site (if transportation liability involved. hing agency harmless for risks associated with	
8. 9. 10.	Complies with the rules an Adheres to all policies and Shall not perform duties in Any student failing to com Shall be responsible for tr	n which he/she has not received inst aply with policies, rules and regulation ansportation to and from the job sha	ol, CTE teacher, and business/industry. ruction. ons is subject to dismissal from the program.	
13. 14.	Secures appropriate experiences for job shadowing based on the student's career objective/pathway. Counsels the student about the shadowing experience, behavior, attitude, academics, etc. Reinforces career shadowing experience with related classroom instruction.			
15. 16. 17.	Provides supervision and career objective during th Employs a non-discrimina age.	instruction of the student in acquiring e job shadowing experience. tion policy with regard to race, colo	g experience designed for career exploration. ng the competencies necessary for success in thei r, handicap, sex, religion, national origin, creed, o local laws pertaining to student employment.	
Signatu	ires are required for student t	o participate in Job Shadowing.	Date:	

Student

CTE Teacher

Parent/Legal Guardian