## **Integrated Work Experience Approval Form**



Office of Instruction Mat-Su Borough School District 501 N. Gulkana Matanuska-Susitna Palmer, AK 99645 (907)761-4042

This is a program of vocational education in which students in grades 10-12 apply learned skills to on-the-job performance. Students will participate in a work experience program that relates to the occupational goals of the prerequisite course, Employability Orientation. Students apply and refine occupational skills, seek and secure employment using proper job search techniques, discover and practice proper work environment skills, and participate in the safe work environment that follows State of Alaska Dept. of Labor regulations, Chapter 10-Employment of Children. Students must work 120 hours of approved employment per semester for .5 credit. Students will have bi-weekly evaluations by coordinators. It is highly recommended that students take the course Customer Service in addition to the prerequisite, Employability Orientation.

|                                  | omit my work verii |                  | Date                     | Parent/Guardian S                                       | Signature                                       | Date             |
|----------------------------------|--------------------|------------------|--------------------------|---|---|------------------|
| esponsibility to sub             | omit my work verii |                  |                          |   |   |                  |
|                                  |                    |                  | •                        |   |   |                  |
|                                  |                    |                  |                          | School District's Other (<br>to receive credit toward g | Credit Option Policy. I understan<br>raduation. | nd that it is my |
|                                  |                    |                  |                          |   |   |                  |
|                                  |                    |                  |                          |   |   |                  |
| Other or Exce                    | eptions (Please    | indicate the co  | urse name or numbe       | r in the space below).                                  |   |                  |
| Employability Orientation (9967) |                    | 67)              | Customer Service (85030) |   | College and Career Prep (9111/2V)               |                  |
| Please indicate p                | rerequisite cour   | se taken prior t | o or concurrently.       |   |   |                  |
|                                  |                    |                  |                          |   |   |                  |
|                                  |                    |                  |                          |   |   |                  |
| Describe the work                | experience yo      | u performed or   | intend to perform.       |   |   |                  |
|                                  |                    |                  |                          |   |   |                  |
| Supervisor(s) Pho                | one Number         |                  | Supervisor(s) E-m        | ail Address   |   |                  |
| Supervisor(s)                    |                    |                  |                          |   |   |                  |
| Employment Loca                  | ation              |                  |                          |   |   |                  |
|                                  | <u> </u>           |                  | High Sch                 | 001   |   |                  |
|                                  |                    |                  | Grade Le                 |   | Graduation Year                                 |                  |
| Mailing Address                  |                    |                  | Student I                |   | Phone Number                                    |                  |

The Original Form is to be filed in the student's permanent file after approval, one copy is to be filed with the counselor, and one copy is for the student.

## **Integrated Work Experience Verification Log**



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(907)761-4042 A separate verification log should be completed for each bi-weekly evaluation. Student Name Student ID # Phone Number Mailing Address Grade Level **Graduation Year** High School **Employment Location** Supervisor(s) Supervisor(s) Phone Number Supervisor(s) E-mail Address Supervisor Bi-Weekly Evaluation Please Indicate in the appropriate box where you feel the student is performing under each employability skill. Start Date: End Date: 1=Never 3=Sometimes **Employability Skills** 2=Rarely 4=Frequently 5=Always Responsible/Self Disciplined Is a self-starter; is committed to and accountable for work assigned; does not just do the bare minimum to get the job done; is loyal to the employer. **Good Team Member** Shares information; works well and credits (praises) other workers; puts the team above personal interests **Honesty & Integrity** Bases actions on a personally held set of values; can be trusted to follow the rules when supervisors are not present; keeps his/her word. Dependability/Follows Through Works diligently to complete the tasks; alerts supervisor to problems or delays so that there are no surprises about work not being done. Good Attendance/On-Time Can be depended upon to be at work except for good reasons, such as illness or death in the family; ready to begin work on time. **Accuracy of Work/No Waste** Is careful and avoids mistakes: if mistakes are made. will correct the errors; takes pride in work well done; holds high standards. Supervisor's Signature Total hours Evidence of employment attached in the form of a pay stub, W-2 form, or a letter from the Employer. Note to the Registrar: Course Number 9969: Grade is Pass/Fail

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A .5 credit may be earned for 120 hours of work hours. Course may be repeated for credit.