

2015-2016
A.W. BEATTIE CAREER CENTER
COOPERATIVE EDUCATION
COOPERATIVE EDUCATION TRAINING AGREEMENT

Pennsylvania Vocational Education Regulations and Standards and Pennsylvania and Federal Child Labor Laws require a written Training Agreement and Training Plan for each student-learner in Vocational Cooperative Education Programs.

Student's Name: «sFirst» «sLast»

Social Security #: «sSocSec»

Address: «sAddress»

Telephone: «sPhone»

Birthdate: «sbirth»

Age: _____

Work Permit #: «sWkPrmt»

Student Career Objective: _____ Job Title: _____

Date of Employment Beginning: «StartDate» Days released from school «WorkDays» Beginning Rate of Pay: _____

High School: «sdist»

Vocational Program: «sVocProg»

Training Agency: «eCompany»

Address: «eAddress» «eCityStZip»

Telephone: «ePhone»

Fax «eFax»

cell «eCell»

Training Supervisor: «eEmployerSupervisor»

Mentor «eMentorName»

Weekly Time Schedule:	Monday	Tuesday	Wednesday	Thursday	Friday

Training Agency Responsibilities:

1. The training agency will adhere to all state and federal regulations regarding employment, child labor laws, minimum wages and workmen's compensation.
2. The student-learner will be given a variety of work assignments and be supervised by an experienced person.
3. A periodic evaluation of job progress will be made by the training supervisor on a rating form provided by the school.
4. The training supervisor will arrange a conference with the co-op supervisor when a trainee problem arises.
5. The training sponsor will provide necessary safety instruction throughout the student-learner's training period.
6. The training agency will not employ a student-learner to displace a regular worker.
7. Exposure to hazardous work will be incidental to the student-learner's training and not a part of the student-learner's training program.

Student-Learner Responsibilities:

1. The student-learner agrees to perform the assigned duties in a loyal manner and work to the best interest of all concerned.
2. The student-learner agrees to report job problems to the training supervisor and co-op supervisor.
3. The student-learner will adhere to company policy; employment may be terminated for the same reasons as regular workers.
4. The student-learner must be regular in attendance at school and on the job. If unable to report to work, the employer, and Co-op Supervisor (412) 847-1914 will be notified before the start of the normal workday.
5. The student-learner **must** attend **all** scheduled co-op classes and turn in all time sheets, pay stubs and modules.
6. The student-learner's employment will be terminated upon withdrawal from school.

School Responsibilities:

1. The program is under the direct supervision of a certified cooperative education supervisor.
2. The student-learner will receive related instruction and safety instruction from the occupational instructor or the cooperative education supervisor prior to job placement.
3. The cooperative education supervisor will visit the student-learner and training supervisor on a regular basis at the training site.

EMPLOYERS OF VOCATIONAL COOPERATIVE EDUCATION STUDENTS will not discriminate in its educational programs, activities or employment practices, based on race, national origin, sex, sexual orientation, disability, age, religion, ancestry, union membership, creed, marital status, or any other legally protected classification. Announcement of this policy is in accordance with state and federal laws, including TitleIX of the Education Amendments of 1972, Sections 503 and 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990.

This memorandum is for the purpose of outlining the agreement between the school and employer on the conditions of training to be given a student-learner while on the job.

We, the undersigned, agree to the conditions and statements contained in this agreement.

Student-Learner («sFirst» «sLast»)	Date	Parent/Guardian («ParentName»)	Date
Cooperative Education Supervisor	Date	Employer («eEmployerSupervisor»)	Date

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RECOMMENDATION

«sFirst» «sLast» _____ «sVocProg» _____ «sdist» _____
Student Name Program District AM PM

Present Date ___ / ___ / ___ School Day Number ___ Number of days absent _____

Percent Attendance _____ % (school day number – number of days absent = days attended / school day number)

Grade (last period) _____ Present Grade _____

Student must have 85% attendance, completed introductory competencies, maintain C grade

Please rate the student's attributes below, five (5) strongly agree, one (1) strongly disagree

Attributes

agree

disagree

1. Demonstrates ability to interact with others.....	5 4 3 2 1
2. Capable to work in field with proper supervision	5 4 3 2 1
3. Demonstrates a positive attitude	5 4 3 2 1
4. Understands and works safely.....	5 4 3 2 1
5. Acts in a responsible manner	5 4 3 2 1

Student must score a minimum of 15 attribute points (no score of 2 or lower) total points _____

Recommended

Not Recommended

Instructor («sInstructor»)

NOTIFICATION of HOME SCHOOL

The student listed above has been recommended to participate in a cooperation education experience. The student is required to provide his/her own transportation to the job site. This is not a request for an early dismissal or tardy excuse. This is to notify you that the student may be leaving/arriving from/to your campus utilizing his/her own form of transportation. Please be advised he/she may need the appropriate driving permissions. A copy of the CAREER EXPERIENCE APPLICATION should be attached. The application will define when the experience will begin and end. It will also indicate the days of the week the student will be on his/her cooperative education experience.

I acknowledge that my son/daughter will be participating in a career experience and I will provide transportation for him/her to and from the career site.

Parent/Guardian Signature («ParentName») _____ / / _____
Date

It is acknowledged the above student will be participating in an internship/clinical experience requiring transportation to or from his/her job site.

Home School Principal or Counselor _____ / / _____
Date

Cooperative Education Coordinator _____ / / _____
Date

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Notification of Student starting a career experience

Student Information

Student name.....«sFirst» «sLast»
address.....«sAddress»
City State Zip.....«sCityStZip»
Session.....«sAMPM»
Vocational Program.....«sVocProg»
Instructor.....«sInstructor»
Home School.....«sdist»
Grade.....«sGrade»
Birth Date.....«sbirth»
Phone Number.....«sPhone»
Social Security No.....«sSocSec»
Work permit number.....«sWkPrmt»

Parent/Guardian Contact Information

Parent/Guardian Name.....«ParentName»
Phone contact 1.....«pPhone»
Phone contact 2.....«pPhone2»
Emergency contact name.....«EmerName»
Phone contact 1.....«EmerPhone1»
Phone contact 2.....«EmerPhone2»

Employer Information

Employer name.....«eCompany»
Address.....«eAddress»
City State Zip.....«eCityStZip»
Phone number.....«ePhone»
Fax number.....«eFax»
Cell phone number.....«eCell»
Manager/Supervisor name.....«eEmployerSupervisor»
Mentor name.....«eMentorName»

Work Status

Begin training date.....«StartDate»
Scheduled school release days.....«WorkDays»
Type of experience.....«CoopIntern»

A.W. BEATTIE CAREER CENTER COOPERATIVE EDUCATION

RULES AND REGULATIONS

Parent Initial	Student Initial
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- | | | |
|-------|-------|--|
| _____ | _____ | 1. Report to work on the days and times indicated by the employers on the Training Agreement. In the event of illness or an emergency which prevents attendance at the job or Career Center as scheduled, notify the employer and the coordinator of the cooperative education prior to the absence if possible, but in no case later than the day of the absence. |
| _____ | _____ | 2. Report to the Career Center every day not scheduled for work, or scheduled for evening hours, or when there is no work due to weather conditions, lack of material, lack of work, etc. Remain at the Career Center for the entire class period and perform duties as assigned by the CTE instructor. |
| _____ | _____ | 3. Attend the home school every day unless excused. Do not attend work if absent from school. |
| _____ | _____ | 4. Report to the Career Center for career related training every Monday while you are on a work experience. You will be required to participate in related classes given by the Cooperative Education Coordinator. These classes will be on alternating Mondays. If the class ends early and on opposite Mondays, you will report to your program area.
You will be required to remain at the Career Center until 2:30 pm. |
| _____ | _____ | 5. Provide proof of actual hours worked in the form of verifiable documentation. Student must turn in time sheets of the prior work weeks and provide a copy of their pay stub . Failure to do this could result in removal from the program. |
| _____ | _____ | 6. A student in the cooperative education program at A. W. Beattie Career Center must work at least 3 hours a day they are released from Beattie. These hours must be during the regular school hours |
| _____ | _____ | 7. Receive satisfactory performance evaluations from the employer. Employment may be terminated at the employer's discretion. |
| _____ | _____ | 8. Maintain a "C" average or better at A. W. Beattie Career Center. |
| _____ | _____ | 9. Notify the coordinator of Cooperative Education prior to quitting a job, or if the job is terminated. |
| _____ | _____ | 10. You will need to purchase a parking permit for A W Beattie Career Center at a cost of \$25.00. |
| _____ | _____ | 11. Students are responsible for their own transportation to and from work. |
| _____ | _____ | 12. Students will follow all of the rules and policies of the company, especially those governing safety and dress. |

I have read these rules and regulations for the Cooperative Education program and agree to comply with them. I understand that failure to do so may result in removal from the program.

Student's Signature («sFirst» «sLast»)

Date

I have read these rules and regulations for the Cooperative Education program and will support my son/daughter in complying with them.

Parent/Guardian Signature («ParentName»)

Date

**A.W. BEATTIE CAREER CENTER
COOPERATIVE EDUCATION**

SCHOOL TO WORK NOTIFICATION

STUDENT NAME: «sFirst» «sLast»

STUDENT PHONE #: «sPhone»

FORMS:

- CAREER EXPERIENCE APPLICATION
- TEACHER RECOMMENDATION
- RULES AND REGULATIONS
- TRAINING AGREEMENT
- TRAINING PLAN
- DRUG SCREENING
- DRIVER'S LICENSE/WORK PERMIT
- CERTIFICATE OF LIABILITY
- FEDERAL CRIMINAL HISTORY RECORD (Fingerprinting)
- PENNSYLVANIA STATE CRIMINAL RECORD CHECK
- PENNSYLVANIA CHILD ABUSE HISTORY CLEARANCE

NOTES:

**STUDENT HAS COMPLETED ALL REQUIREMENTS AND IS READY TO START
JOB EXPERIENCE.**

Coordinator signature _____ Date _____