# Powell County High School Career and Technical Education

# School To Work Program



Empowered: It's not just content, it's skills

Powell County High School 700 West College Avenue Stanton, KY 40380 (606) 663-3320

### What is a School to Work program?

School to Work is a paid educational program consisting of in-school instruction combined with program related on-the-job work experience in a business or industrial establishment. These are planned experiences supervised by the school and the employer to ensure that each phase contributes to the student's Individual Learning Plan (ILP) and Career Pathway.

### What are the benefits of a School to Work program?

School to Work provides opportunities for students to learn under real-life work conditions and to develop occupational competencies (attitudes, technical skills, and knowledge) needed to be successful in their chosen career. The school selects, as a training agency, a firm that will provide and coordinate occupational career experiences that will further the student's education and employability skills. The program provides students with an opportunity to graduate as individuals who practice 21st century skills and are considered to be college- and career-ready

### **How can I participate in a School to Work Program?**

Prior to participating in a School to Work program, students will collaborate with the guidance counselor to complete the *Powell County High School School to Work Program Application Packet*. The student will submit the application and the requested documents to the School to Work Coordinator. If approved, the School to Work Coordinator will provide the student and parents/guardians with a *School to Work Approval Letter* and the following forms to complete prior to beginning the School to Work Program:

- Parent/Guardian Participation and Travel Consent Form
- Parent Medical Consent Form
- School to Work Obligations and Expectations Form
- Absenteeism, Transfers and Terminations Form
- Confidentiality Statement Form
- School to Work Work-Based Learning Plan and Agreement
- Addendum for Student Learner in Hazardous Occupations and Cooperative Education Training Plan (*If Applicable*)

Once enrolled in the School to Work Program, the student and employer will complete the following documents prior to the end of *EACH* six-week grading period. It is the responsibility of the student to submit the student and employer forms to the School to Work Coordinator:

- Employer Student Evaluation Form (employer complete)
- Student Evaluation Form (student complete)
- Student Six-Week Grading Period Time Sheet (student complete)

During the student's placement in the School to Work Program, the School to Work Coordinator will maintain the student file which will contain the Student Application and all completed forms and agreements. In addition, the school coordinator will:

- Add the Employer Student Evaluation Form, Student Evaluation Form, and Student Six-Week Grading Period Time Sheet to the file each six week grading period
- Maintain the *School to Work Monitoring/Observation Log* in the student's file

\*\*\*It is the responsibility of the School to Work Coordinator to collaborate with the CTE Guidance Counselor and Attendance Clerk for individual student enrollment in a School to Work Program.

## Powell County High School School to Work Program Application Packet

| Student's Name:  |  | School Year:   |  |
|--|--|--|--|
| Academic Pathway:                                      |  | Date Submitted:  |  |
| complete the <i>H</i> submit the app<br>School to Worl | ipating in a School to Work program, stude Powell County High School School to Work I blication and the requested documents to the & Coordinator will provide the student and pare forms to complete prior to beginning the School | <b>Program Application Packet.</b> The student will School to Work Coordinator. If approved, the nts/guardians with a <b>School to Work Approval</b> |  |
| Application  | n Packet Checklist:  |  |  |
|  | Completed School to Work Program Ap  | plication  |  |
|  | Teacher Recommendation Form  | -  |  |
|  | Guidance Counselor Recommendation  | Form   |  |
|  | Work Permit/Working Papers (if under   | age of 18)   |  |
| Once Appr  | oved for the School to Work Program:   |  |  |
|  | Parent/Guardian Participation and Travel Consent Form  |  |  |
|  | Parent Medical Consent Form  |  |  |
|  | School to Work Obligations and Expectations Form   |  |  |
|  | Absenteeism, Transfers and Termination   | ns Form  |  |
|  | Confidentiality Statement Form   |  |  |
|  | School to Work Work-Based Learning I   | _  |  |
|  | Addendum for Student Learner in Haza   | rdous Occupations and Cooperative  |  |
|  | Education Training Plan (If Applicable)  |  |  |
|  | Worker's Compensation (Obtain from E   | Employer)  |  |
|  | Driver's License   |  |  |
|  | Vehicle Insurance  |  |  |
|  | Health Insurance   |  |  |
| Forms Con  | npleted Each Six Week Grading Period:  |  |  |
|  | Employer Student Evaluation Form   |  |  |
|  | Student Evaluation Form  |  |  |
|  | Student Six-Week Grading Period Time   | Sheet  |  |

\*\*\*This form should be submitted with the application and will be maintained in the student's School to Work Folder by the School to Work Coordinator

School to Work Monitoring/Observation Log

# SCHOOL TO WORK PROGRAM APPLICATION PACKET: STUDENT APPLICATION

### **PCHS Office of Career and Technical Education**

| Student Information:                            |   |
|---|---|
| Name:   | Pathway:                                      |
| Date of Birth:                                  | Age:  |
| Social Security Number:                         | Phone Number:                                 |
| Address:  |   |
| Parent/Guardian Information:                    |   |
| Mother's Name:                                  | Occupation:                                   |
| Father's Name:                                  | Occupation:                                   |
| Current Employment:                             |   |
| Place of Employment:                            | Type of Business:                             |
| Job Title:                                      | Supervisor Name:                              |
| Address:  | Phone:  |
| Previous Employment:                            |   |
| Place of Employment:                            | Type of Business:                             |
| Job Title:                                      | Supervisor Name:                              |
| Address:  | Phone:  |
| Employment Questions:                           |   |
| If you are currently <i>unemployed</i> , in who | at type of business would you prefer to work? |
| If you are currently <i>employed</i> , are you  | interested in changing jobs?                  |
| Do you have a work permit? I                    | Permit Number: Permit Date:                   |
| Transportation:                                 |   |
| Do you have a driver's license?                 | Do you have access to a car for daily work?   |

### **CLASS SCHEDULE**

| Period  | Course  | Teacher   | Room Number   |
|---|---|---|---|
|   |   |   |   |
|   |   |   |   |
|   |   |   |   |
|   |   |   |   |
|   |   |   |   |
|   |   |   |   |
|   |   |   |   |
| What school activities,   | if any, have you partic                               | ipated in?  |   |
|   |   |   |   |
| What school activities,   | if any, do you plan to p                              | participate in during tl                              | nis current school year?                              |
|   |   |   |   |
| As an applicant to the P<br>advantage of every oppo<br>and world of work. In a<br>tool and does NOT guar<br>employment. | ortunity that will improv<br>ddition, I understand th | e my skills and efficient<br>is application only serv | ecy in both the classroom<br>ves as a data collection |
| Student Signature:  |   | 1   | Date:   |
| Parant/Guardian Signa   | aturo.  | 1   | Date:   |

# SCHOOL TO WORK PROGRAM APPLICATION PACKET: TEACHER RECOMMENDATION

**PCHS Office of Career and Technical Education** 

| Student's Name:   | Date:    |
|-------------------|----------|
| Academic Pathway: | Teacher: |

### **Evaluation**

| Scale: 1 – Poor | 2 - Needs Improvement | 3 - Average | 4 - Good | 5 - Excellent |
|-----------------|-----------------------|-------------|----------|---------------|
|                 |                       |             |          |               |

| Attendance/Punctuality | 1 | 2 | 3 | 4 | 5 |
|------------------------|---|---|---|---|---|
| Appropriate Behavior   | 1 | 2 | 3 | 4 | 5 |
| Attitude               | 1 | 2 | 3 | 4 | 5 |
|                        |   |   |   |   |   |
| Dependability          | 1 | 2 | 3 | 4 | 5 |
| Initiative             | 1 | 2 | 3 | 4 | 5 |
| Following Directions   | 1 | 2 | 3 | 4 | 5 |

| Cooperation                            | 1 | 2 | 3 | 4 | 5 |
|--|---|---|---|---|---|
| Adaptability/Flexibility               | 1 | 2 | 3 | 4 | 5 |
| Relations with Other Students/Teachers | 1 | 2 | 3 | 4 | 5 |
| Time Management                        | 1 | 2 | 3 | 4 | 5 |
| Quality of Work                        | 1 | 2 | 3 | 4 | 5 |
| Quantity of Work                       | 1 | 2 | 3 | 4 | 5 |

| Teacher Signature: | Date: |  |
|--------------------|-------|--|
|                    |       |  |

# SCHOOL TO WORK PROGRAM APPLICATION PACKET: GUIDANCE COUNSELOR RECOMMENDATION

**PCHS Office of Career and Technical Education** 

| Student's Name:   | Date:   |
|---|---|
| Counselor Name:   | <b>Expected Graduation Date:</b>                          |
|   |   |
| <b>Attendance</b>   |   |
| Absence Totals  | Tardy Totals  |
| 9th Grade   | 9th Grade   |
| 10th Grade  | 10th Grade  |
| 11th Grade  | 11th Grade  |
| 12th Grade, to date   | 12th Grade, to date                                       |
| <b>Academics</b>  |   |
| Number of Credits Earned to Date:   | Current GPA:  |
| Number of Credits Needed to Graduate:                                       | Is the Student on Track to Graduate?                      |
| Is the student's schedule adaptable to include                              | de him/her in the School to Work Program?                 |
| Recommendation  |   |
| The student <b>DOES</b> have suffit to enroll in the School to Work Program | icient credits, GPA, and a satisfactory attendance record |
| The student <b>DOES NOT</b> have  | e sufficient credits, GPA, and a satisfactory attendance  |
| record to enroll in the School to Work Pro                                  | ogram   |
|   |   |
| Counselor Signature:  | Date:   |

#### SCHOOL TO WORK APPROVAL LETTER

#### PCHS Office of Career and Technical Education

#### Dear Parent/Guardian

Your student has been accepted to the PCHS School to Work Program as a course offered at Powell County High School. As a result, *your student will not meet daily in a classroom for the School to Work Course* but will be given assignments periodically to be completed while participating in a workplace environment. The School to Work Program is designed for seniors at Powell County High School to leave school at 1:30 p.m. daily to report to his/her place of employment. Students *MUST* have employment before they will be permitted to continue this program.

### • Employers are defined as the following:

- o Commercial Businesses, Professional Organizations, Licensed Professionals
- Licensed Contractors\* and Working Farming Operations\*

\*If a student is employed by a contractor or working farming operation, they MUST be enrolled in a Co-Op through PCHS. They may not leave during the work block to attend these jobs unless enrolled in the Co-Op

### • Employers are NOT:

- o Babysitting
- Working with relatives who are not in the above categories
- Mowing the Yard
- Cleaning the House
- Anything that cannot be placed in the four categories of Employers listed above

# With minimal classroom interaction for the School to Work Course, the following criteria is required of all students in the School to Work Program:

- Complete all required forms each six week grading period
- Complete a career assignment each six weeks (assignments remain open for the full six weeks and then are closed, no exceptions).
- Students attend one monthly class meeting and attendance is required

It is our practice to communicate with parents/guardians when a student is not complying with course requirements and/or is in danger of not passing the course. However, if a student does not comply with the assignments, they can and will fail the course and not receive the credit needed to graduate. If the loss of a job occurs, students must notify the School to Work Coordinator immediately. If a student cannot find employment by the end of the current six week period, the student will be removed from the School to Work program. Students who receive a failing grade at midterm of the first six weeks of school must increase their grade to passing by the end of the six weeks. Failure to do so will result in the student being removed from the program and placed in a class for remediation and will not be permitted to re-enter the program in the Spring Semester. Thank you in advance for your cooperation to ensure the success of your student.

Sincerely,

# SCHOOL TO WORK PARENT/GUARDIAN PARTICIPATION AND TRAVEL CONSENT FORM

### **PCHS Office of Career and Technical Education**

Your child will be participating in a School to Work program. School to Work is a paid educational program consisting of in-school instruction combined with program related on-the-job work experience in a business or industrial establishment.

| Permission to Participate in School to Work   |
|---|
| may travel to   |
| (Student Name) (School to Work Site/Business)   |
| for his/her School to Work employment. In granting permission, I accept all moral, legal, an  |
| medical responsibilities associated with his/her School to Work placement. Furthermore, I relieve   |
| the Powell County School District, School to Work Coordinator, and the above listed School  |
| Work site from any responsibility not associated with proper adult supervision.   |
| Permission to Travel to School to Work Site   |
| I grant permission for my son/daughter to travel using his/her own car.   |
| YesNo   |
| I grant permission for my son/daughter to travel with another student driver.   |
| YesNo If yes, name of student   |
| I will provide transportation for my son/daughter to and from the School to Work site.  |
| YesNo   |
| Photo Release   |
| I grant permission to photograph my child while participating in the School to Work program for program promotion and educational purposes. YesNo |
| Signature of Parent/Guardian: Date:   |

### SCHOOL TO WORK MEDICAL AUTHORIZATION

**PCHS Office of Career and Technical Education** 

| <b>Student Information</b>   |  |   |
|--|--|---|
| Student's name:  |  |   |
| Date of birth:   |  |   |
| Address:   |  |   |
| Daytime phone for parent or guardian: (  | )  |   |
| Contact name other than parent or guardian:  |  |   |
| Relation to student:   | Phone: (   | )   |
| Family doctor:   | Phone: (   | )   |
| Preferred hospital:  | Phone: (   | )   |
| Medical Consent  Should it be necessary for my child to have medi to Work program, I hereby give the school district their best judgment in obtaining medical service the physician selected to render whatever medappropriate.  YesNo  Permission is granted to release emergency contator to work-site personnel if needed.  YesNo | t and/or work-site person<br>for my child, In addition,<br>dical treatment he/she do | nel permission to use<br>I give permission to<br>eems necessary and |
| Signature of Parent/Guardian   | Date   |   |

### SCHOOL TO WORK OBLIGATIONS AND EXPECTATIONS FORM

### **PCHS Office of Career and Technical Education**

- Student will obtain necessary signatures and complete all necessary forms before reporting to work, during the School to Work experience, and following the School to Work Experience.
- Student will notify the employer if unable to report to work due to illness and/or emergency.
- If injured at work, the student/parent will notify both the work supervisor and the school School to Work Coordinator immediately.
- If the job is terminated due to layoff or firing, the student will notify the school coordinator immediately.
- A student who loses his/her job during the school year because of inefficiency, lack of interest, not abiding by the rules and regulations, etc., will receive a 50% for the grading period and may possibly fail the course.
- Student must observe all safety regulations at the training location at all times.
- No student may terminate his/her work without the knowledge and consent of the School to Work Coordinator.
- If school is delayed for any reason, the student will contact the work supervisor at the work site, unless other arrangements have been made with the employer.
- Students are expected to follow the work site calendar. Traditional holidays are not automatic for students. The work site supervisor, student, and School to Work Coordinator make final determination of the student schedule.
- Students must keep good attendance at both the work site and at school. If student absence is a problem, the students may be removed from the program.
- All students on early work release are required to be enrolled in and successfully complete the School to Work course.
- All students will be required to maintain a portfolio. The School to Work coordinator will assist with its contents.

| Signature of Student:         | Date: |  |  |
|-------------------------------|-------|--|--|
|                               |       |  |  |
| Signature of Parent/Guardian: | Date: |  |  |

# SCHOOL TO WORK ABSENTEEISM, TRANSFERS, AND TERMINATIONS FORM

### **PCHS Office of Career and Technical Education**

#### Absenteeism

- Excessive absences from work and/or school may result in the removal from the School to Work program, thus forfeiting any credit
- If a student is too ill to attend school, the student is too ill to go to work
- If a student is absent from the related instructional class, it is his/her responsibility to arrange make-up work
- If an absence is unexcused, work can not be made up and the student's grade will be adversely affected

#### **Transfers**

- No student is permitted to change jobs without first notifying the School to Work Coordinator
- Appropriate reasons for transfers may include:
  - o Layoff from work site for an extended duration of one month or more
  - o Physical ailments, illnesses, or disability
  - Severe personality conflict with supervisor or fellow employee
  - o Better employment offer
- For a transfer to be completed, the student must:
  - Notify the School to Work Coordinator in advance
  - o Give the employer a one to two weeks' notice
  - o Complete new Work-Based Learning Plan and Agreement
- A new School to Work site should be secured and approved before leaving one's present site
- Failure to notify the School to Work Coordinator of termination from a site will result in the student's return to a full-day schedule

### **Termination**

- Any student enrolled in a School to Work program may be released from the program under any of the following conditions:
  - Failure to stay in good academic standing
  - Failure to notify the employer before absence from the job
  - Failure to notify the School to Work Coordinator of any changes, including layoffs, termination or etc.
  - Employer does not have adequate work to keep the student employed
  - An evaluation is made and it is determined the student is not receiving organized and progressive work experience related to the School to Work course
  - o Excessive absenteeism from school or work
  - It is determined by administration the student is not representative of the school's best interest or the student is not following rules and regulations of the program

The School to Work Coordinator and Guidance Counselor, in conjunction with the Principal, has the authority to administer and amend the above causes of termination as individual cases warrant

| Signature of Student:         | Date: |
|-------------------------------|-------|
| -                             |       |
| Signature of Parent/Guardian: | Date: |

### **CONFIDENTIALITY STATEMENT FORM**

**PCHS Office of Career and Technical Education** 

I agree that I shall strictly maintain the confidentiality of all information and data disclosed throughout the School to Work program. Additionally, I accept the responsibility of security given to me when entrusted with materials, property, and information.

| Student Name:                         |       | _ |
|---------------------------------------|-------|---|
| Student Signature :                   | Date: | _ |
| Employer Name:                        |       |   |
| Employer Signature:                   | Date: |   |
| School to Work Coordinator Name:      |       |   |
| School to Work Coordinator Signature: | Date: |   |

### **PCHS Office of Career and Technical Education**

# **Student Information** Student's Name: Date of Birth: Grade: Cell Phone Number: Email: **School Information** Academic Pathway: \_\_\_\_\_ Counselor: \_\_\_\_\_ Counselor Phone: \_\_\_\_\_ School to Work Coordinator: \_\_\_\_\_ Coordinator Phone: \_\_\_\_\_ **Company/Business Information** Company/Business Name: Company/Business Phone Number: Company/Business Address: Mentor/Supervisor Name and Title: **Student Work Schedule** Start and End Dates: Days and Hours: Total Hours Per Week: \_\_\_\_\_ Hourly Wage: \_\_\_\_

Based on the Work-Based Learning Type, complete the following:

|  | Name:                               | School Year:   |
|--|-------------------------------------|--|
|  | General Work                        | kplace Competencies  |
| Atte   | endance / Punctuality               | Adaptability / Flexibility   |
| App  | propriate Dress                     | Relationships with Co-Workers  |
| Attit  | tude                                | Time Management  |
| Dep  | endability                          | Quality of Work  |
| Initi  | ative                               | Quantity of Work   |
| Abil   | lity to Follow Directions           | Abides by Company Rules / Regulations  |
| Job  | Knowledge                           | Safety   |
| Coo  | peration                            | Use of Equipment   |
| 1.   |                                     |  |
|  | Technical Skills / Compete          | encies (Hazardous Occupations*)  |
|  |                                     |  |
|  |                                     |  |
| 2.   |                                     |  |
| 2.<br>3.   |                                     |  |
| 2.<br>3.<br>4.   |                                     |  |
| 2.<br>3.<br>4.<br>5.                                   |                                     |  |
| 2.<br>3.<br>4.<br>5.<br>6.                             |                                     |  |
| 2. 3. 4. 5. 6. 7. *The adde                            | with an exemption for hazardous occ | hall be completed if the school to work placement is cupations.  Safety Competencies |
| 2. 3. 4. 5. 6. 7. *The adde associated                 | with an exemption for hazardous occ | cupations.   |
| 2. 3. 4. 5. 6. 7. *The adde associated  1.             | with an exemption for hazardous occ | cupations.   |
| 2. 3. 4. 5. 6. 7. *The adde associated  1. 2. 3.       | with an exemption for hazardous occ | cupations.   |
| 2. 3. 4. 5. 6. 7. *The adde associated  1. 2. 3. 4.    | with an exemption for hazardous occ | cupations.   |
| 2. 3. 4. 5. 6. 7. *The adde associated  1. 2. 3. 4. 5. | with an exemption for hazardous occ | cupations.   |
|  | with an exemption for hazardous occ | cupations.   |

### The student agrees to:

• ensure I have adequate transportation to and from work

- maintain satisfactory ratings in all my school courses
- be released from school, and I must work at least ten hours during the week
- be paid or receive credit towards my court-ordered restitution for my part-time work experience
- be courteous and considerate of the employer, co-workers, and others
- keep the employer's best interest in mind and to be punctual, dependable and loyal
- notify the employer and the coordinator as soon as possible if they are not able to attend work and/or school
- keep such records of work experiences and wages (if applicable) earned as required by the school and to submit them on or before specified deadlines
- conform to the policies, procedures and regulations of the employer and the school
- maintain a satisfactory performance level while on the job
- abide by the WBL Plan/Agreement developed by the teacher, coordinator and employer
- understand I may be released from the program for violating any of these terms at any time

### The teacher/coordinator agrees to:

- prepare, with assistance of the training supervisor, a WBL Plan/Agreement
- revise the WBL Plan/Agreement as needed to improve the student's work experience
- visit the student on the job as often as appropriate to the WBL experience to determine instructional needs and to ensure that the student receives job training and supervision, as well as a variety of job experiences
- maintain confidentiality related to the information gathered from the company/business
- adequately train and prepare the student for success, prior to the WBL placement

#### The parent/guardian agrees to:

- accept responsibility for the student's safety and conduct while traveling to and from school, place of employment and/or home
- support the concepts of work-based learning experiences
- abide by the WBL Plan/Agreement for hazardous occupations, when applicable

#### The employer agrees to:

- take an active part in the training and supervision of the student while providing instruction in accordance with the WBL Plan/Agreement
- provide safety training as required by OSHA
- assist the teacher/coordinator in the evaluation of the student's performance on the job by completing the necessary evaluation forms, when required
- provide close supervision by an experienced and qualified person to avoid subjecting the student to unnecessary or unusual hazards
- give the same consideration to the student as given to other employees in regard to safety, health, general employment conditions and other regulations of the business
- comply with all regulations prohibiting discrimination on the basis of race, color, national origin, sex, disabilities, religion, marital status or age
- comply with all laws regarding wages and hours of minors and student learners
- contact the teacher/coordinator prior to the student's dismissal from employment
- pay the student/trainee when an employer/employee agreement is negotiated

• ensure that all supervising employees have completed a criminal background check

Signatures

- maintain confidentiality of student information in accordance with state and federal law
- If this agreement is for a paid work-based learning placement, the employer certifies that this student is covered by Worker's Compensation Insurance and that the policy is now in force and registered with the Kentucky Department of Workers Claims as prescribed by KRS 342.630 (or with the appropriate agency, if the place of employment is outside of the state of Kentucky).

Date

| Student:                                    |                                       |         |
|---|---------------------------------------|---------|
| Parent/Guardian:                            |                                       |         |
| School to Work Coordinator:                 |                                       |         |
| CTE Counselor:                              |                                       |         |
| Principal:                                  |                                       |         |
| Employer:                                   |                                       |         |
| Copies of the completed (have been sent to: | Co-Op Work-Based Learning Plan and Ag | reement |
| ☐ Student                                   |                                       |         |
| ☐ Parent/Guardian                           |                                       |         |
| ☐ School to Work Co                         | ordinator                             |         |
| ☐ CTE Counselor                             |                                       |         |
| ☐ Principal                                 |                                       |         |
| ☐ Employer                                  |                                       |         |

**Addendum for Student Learner in Hazardous Occupations** 

# and Cooperative Education Training Plan (for minors under 18 years of age)

### To be attached to the School to Work Work-Based Learning Plan and Agreement

### Non-Agricultural Hazardous Occupations Prohibited for Minors Ages 16-17

| <ul> <li>HO 1 Manufacturing and storing of explosives</li> <li>HO 2 Motor-vehicle driving and outside helper on a motor vehicle</li> <li>HO 3 Coal mining</li> <li>HO 4 Occupations in forest fire fighting, forest fire prevention, timber tract operations, forestry service logging and sawmilling</li> <li>HO 5* Power-driven woodworking machines</li> <li>HO 6 Exposure to radioactive substances</li> </ul> |
|--|
| HO 3 Coal mining  HO 4 Occupations in forest fire fighting, forest fire prevention, timber tract operations, forestry service logging and sawmilling  HO 5* Power-driven woodworking machines  |
| HO 4 Occupations in forest fire fighting, forest fire prevention, timber tract operations, forestry service logging and sawmilling  HO 5* Power-driven woodworking machines  |
| logging and sawmilling  HO 5* Power-driven woodworking machines  |
|  |
| HO 6 Exposure to radioactive substances  |
| A A  |
| HO 7 Power-driven hoisting apparatus, including forklifts  |
| HO 8* Power-driven metal-forming, punching and shearing machines   |
| HO 9 Mining, other than coal mining  |
| HO 10* Operating power-driven meat processing equipment, including <b>meat slicers and other food slicers</b> , in retail establishments (such as grocery stores, restaurants kitchens and delis) and wholesale establishments, and most occupations in meat and poultry slaughtering, packing, processing or rendering  |
| HO 11 Power-driven bakery machines including vertical dough or batter mixers   |
| HO 12* Power-driven balers, compactors and paper processing machines.  |
| HO 13 Manufacturing bricks, tile and kindred products  |
| HO 14* Power-driven circular saws, band saws, chain saws, guillotine shears, wood chippers and abrasi cutting discs  |
| HO 15 Wrecking, demolition and shipbreaking operations   |
| HO 16* Roofing operations and all work on or about a roof  |
| HO 17* Excavation operations   |

<sup>\*</sup> These HOs provide limited exemptions for 16- and 17-year-olds who are bona fide student learners and apprentices.

Agricultural Hazardous Occupations Prohibited for Minors Under the Age of 16

<sup>\*\*</sup> Please reference the Child Labor Bulletin #101 for HOs that pertain to students under the age of 16.

# These prohibitions on employment in hazardous occupations in agriculture do not apply to youth employed on farms owned or operated by their parents

| HO 1* | Operating a tractor of over 20 power-take-off (PTO) horsepower or connecting or disconnecting an implement or any of its parts to or from such a tractor   |
|-------|--|
| HO 2* | Operating or assisting to operate (including starting, stopping, adjusting, feeding or any other activity involving physical contact associated with operation) any of the following machines:  a) corn picker, cotton picker, grain combine, hay mower, forage harvester, hay baler, potato digger or mobile pea viner;  b) feed grinder, crop dryer, forage blower, auger conveyor or the unloading mechanism of a non-gravity type self-unloading wagon or trailer; or  c) power post hole diggers, power post driver or non-walking type rotary tiller |
| HO 3* | Operating or assisting to operate (including starting, stopping, adjusting, feeding or any other activity involving physical contact associated with operation) any of the following machines:  a) trencher or earthmoving equipment  b) forklift  c) potato combine  d) power-driven circular, band, or chainsaw  |
| HO 4* | Working on a farm in a yard, pen or stall occupied by:   |
|       | a) bull, board, or stud horse maintained for breeding purposes; or   |
|       | b) a sow with suckling pigs, or a cow with a newborn calf (with umbilical cord present)  |
| HO 5* | Felling, bucking, skidding, loading or unloading timber with butt diameter of more than 6 inches.  |
| HO 6* | Working from a ladder or scaffold (painting, repairing or building structures, pruning trees, picking fruit, etc.) at a height over 20 feet  |
| НО 7  | Driving a bus, truck or automobile when transporting passengers or riding on a tractor as a passenger or helper  |
| HO 8  | Working inside:  |
|       | a) a fruit, forage or grain storage designed to retain an oxygen deficient or toxic atmosphere   |
|       | b) an upright silo within two weeks after silage has been added or when a top unloading device is in operating position  |
|       | c) a manure pit  |
|       | d) a horizontal silo while operating a tractor for packing purposes  |
| НО 9  | Handling or applying toxic agricultural chemicals (including cleaning or decontaminating equipment, disposal or return of empty containers or serving as a flagman for aircraft applying such chemicals). Such toxic chemicals are identified by the word "poison," or "warning," or are identified by a "skull and crossbones" on the label.  |
| HO 10 | Handling or using a blasting agent, including but not limited to, dynamite, black powder, sensitized ammonium nitrate, blasting caps, and primer cord.   |
| HO 11 | Transporting, transferring, or applying anhydrous ammonia.   |
|       |  |

<sup>\*</sup> These HOs provide limited exemptions for minors under the age of 16 who are bona-fide student learners.

As noted in Chapter 1 of the KDE Work-Based Learning Manual, the conditions for an exemption include the following:

- 1) The student learner is enrolled in a course of study and training in a vocational education training program in agriculture under a recognized state or local educational authority or in a substantially similar program conducted by a private school,
- 2) Such student learner is employed under a written agreement which provides:
  - a) that the work of the student learner is incidental to the training
  - b) that such work shall be intermittent, for short periods of time, and under the direct and close supervision of a qualified and experienced person
  - c) that safety instruction shall be given by the school and correlated by the employer with on-the-job training
  - d) that a schedule of organized and progressive work processes to be performed on the job shall have been prepared
- 3) Each such written agreement shall contain the name of the student learner, and shall be signed by the employer and by a person authorized to represent the educational authority of school.
- 4) Copies of each agreement shall be kept on file by both the employer and either the educational authority or the school. 29 CFR 570.72(a).

| Signatures                  | Date |
|-----------------------------|------|
| Student:                    |      |
| Parent/Guardian:            |      |
| School to Work Coordinator: |      |
| CTE Counselor:              |      |
|                             |      |
| Principal:                  |      |
| Employer:                   |      |

### Written Agreement for Employment in Hazardous Occupations

| Job Title |  |
|-----------|--|

| Hazardous Occupation Category and Exemption* | Choose One:  |                                     |
|--|--|-------------------------------------|
| Category and Exemption                       | Non-Agricultural Occupation Agricultural Occupation                      | Exemption Order # Exemption Order # |
| Tasks to be performed at worksite:           |  |                                     |
| Specific hazardous tasks to be               |  |                                     |
| performed at the worksite:                   |  |                                     |
|  | rvision is to be provided for the student le                             |                                     |
| •  | n from Child Labor Order Number j<br>The exemption is effective when all | •                                   |
| School to Work Coordinator /                 | Supervisor (School)  | Date                                |
| Supervisor (Employer)                        |  |                                     |
| Parent / Guardian                            |  | <br>Date                            |

School to Work Employer Student Evaluation Form PCHS Office of Career and Technical Education

| Student's Name:  |                                |        |       |       |  | Academic Pathway:                |       |      |   |     |      |       |
|--|--------------------------------|--------|-------|-------|--|----------------------------------|-------|------|---|-----|------|-------|
| <b>Business Name:</b>  | Business Name: Business Phone: |        |       |       |  |                                  |       |      |   |     |      |       |
| Supervisor Name: Supervisor Phone:   |                                |        |       |       |  |                                  |       |      |   |     |      |       |
| Six Weeks Start Date: Six Weeks End Date:  |                                |        |       |       |  |                                  |       |      |   |     |      |       |
| Student Responsibility six week grading period  Employer Responsibil give this form to the stu | <u>ities</u> :                 | Pleas  | se co | mplet | e the tv   | wo tables below; share y         | -     |      |   |     |      |       |
|  |                                |        |       |       | Eval   | uation                           |       |      |   |     |      |       |
| Scale: 1 – Poor 2  | - N€                           | eds l  | mpr   | ovem  | ent  | 3 - Average                      | 4 - G | lood |   | 5 - | Exce | llent |
| Attendance/Punctuality   | 1                              | 2      | 3     | 4     | 5  | Cooperation                      |       | 1    | 2 | 3   | 4    | 5     |
| Appropriate Dress  | 1                              | 2      | 3     | 4     | 5  | Adaptability/Flexibil            | lity  | 1    | 2 | 3   | 4    | 5     |
| Attitude   | 1                              | 2      | 3     | 4     | 5  | Relations with 1 2 3 4 CoWorkers |       |      |   |     | 4    | 5     |
| Dependability  | 1                              | 2      | 3     | 4     | 5  | Time Management                  |       | 1    | 2 | 3   | 4    | 5     |
| Initiative   | 1                              | 2      | 3     | 4     | <del>                                     </del> |                                  |       |      |   |     | 5    |       |
| Following Directions   | 1                              | 2      | 3     | 4     | 5  | Quantity of Work                 |       | 1    | 2 | 3   | 4    | 5     |
| Strengths of the Stude  Areas of Improveme   |                                | or the | e Stu | dent  | :  |                                  |       |      |   |     |      |       |
| Other Remarks:   |                                |        |       |       |  |                                  |       |      |   |     |      |       |
| Supervisor Signature   | ):                             |        |       |       |  | D                                | ate:  |      |   |     |      |       |

School to Work Program Student Evaluation Form PCHS Office of Career and Technical Education

| Student's Name:       | Academic Pathway:   |
|-----------------------|---------------------|
| Business Name:        | Business Phone:     |
| Supervisor Name:      | Supervisor Phone:   |
| Six Weeks Start Date: | Six Weeks End Date: |

<u>Student Responsibility</u>: Turn in this form to the School to Work Coordinator prior to the end of each six week grading period

### **Evaluation**

Scale: 1 - Poor 2 - Needs Improvement 3 - Average 4 - Good 5 - Excellent

| Work-Based Learning Experience  | Rating |   |   |   |   |
|---|--------|---|---|---|---|
| Related to my career goal   | 1      | 2 | 3 | 4 | 5 |
| Helped in planning my career  | 1      | 2 | 3 | 4 | 5 |
| Still interested in this career   | 1      | 2 | 3 | 4 | 5 |
| Received guidance and direction from the WBL supervisor on site           | 1      | 2 | 3 | 4 | 5 |
| Used time wisely  | 1      | 2 | 3 | 4 | 5 |
| Assigned appropriate amount of work expected; appropriate quality of work | 1      | 2 | 3 | 4 | 5 |
| Emphasized work ethics  | 1      | 2 | 3 | 4 | 5 |
| Provided Work-Based Learning experience as outlined in agreement          | 1      | 2 | 3 | 4 | 5 |
| Was of sufficient length  | 1      | 2 | 3 | 4 | 5 |
| Was a positive experience overall   | 1      | 2 | 3 | 4 | 5 |

| Remarks:           |       |  |
|--------------------|-------|--|
|                    |       |  |
|                    |       |  |
| Student Signature: | Date: |  |

School to Work Program Student Six Week Grading Period Time Sheet PCHS Office of Career and Technical Education

| Student's Name:       | Academic Pathway:      |
|-----------------------|------------------------|
| Business Name:        | <b>Business Phone:</b> |
| Supervisor Name:      | Supervisor Phone:      |
| Six Weeks Start Date: | Six Weeks End Date:    |

**Student Responsibility:** Turn in this form to the School to Work Coordinator prior to the end of each six week grading period

### **Weekly Time Log**

\*Please list the start and end times for each day
\*If you work for the employer on the weekend, you do not have to log that time

| Week & Dates        | Monday | Tuesday | Wednesday | Thursday | Friday | TOTAL<br>HOURS |
|---------------------|--------|---------|-----------|----------|--------|----------------|
| Week One<br>Dates   |        |         |           |          |        |                |
| Week Two Dates      |        |         |           |          |        |                |
| Week Three<br>Dates |        |         |           |          |        |                |
| Week Four<br>Dates  |        |         |           |          |        |                |
| Week Five<br>Dates  |        |         |           |          |        |                |
| Week Six<br>Dates   |        |         |           |          |        |                |

| <b>Student Signature:</b> |     |      |   |   | _ Date: | Date: |   |
|---------------------------|-----|------|---|---|---------|-------|---|
|                           | ~ - | <br> | • | _ |         |       | _ |

School to Work Monitoring/Observation Log
PCHS Office of Career and Technical Education

| Student's Name:  | Academic Pathway: |
|------------------|-------------------|
| Business Name:   | Business Phone:   |
| Supervisor Name: | Supervisor Phone: |

### To Be Completed by the School to Work Coordinator

\*One Contact MUST be made each Six Week Grading Period \*Circle or Highlight the Type of Contact Made

| DATE | TIME | TYPE OF CONTACT MADE   | COMMENTS/RESULTS |
|------|------|--|------------------|
|      |      | <ul> <li>Call to Employer</li> <li>Call from Employer</li> <li>Routine Visit</li> <li>Special Visit</li> </ul> |                  |
|      |      | <ul> <li>Call to Employer</li> <li>Call from Employer</li> <li>Routine Visit</li> <li>Special Visit</li> </ul> |                  |
|      |      | <ul> <li>Call to Employer</li> <li>Call from Employer</li> <li>Routine Visit</li> <li>Special Visit</li> </ul> |                  |
|      |      | <ul> <li>Call to Employer</li> <li>Call from Employer</li> <li>Routine Visit</li> <li>Special Visit</li> </ul> |                  |
|      |      | <ul> <li>Call to Employer</li> <li>Call from Employer</li> <li>Routine Visit</li> <li>Special Visit</li> </ul> |                  |
|      |      | <ul> <li>Call to Employer</li> <li>Call from Employer</li> <li>Routine Visit</li> <li>Special Visit</li> </ul> |                  |