

*Connecticut Technical Education and Career System
Work Based Learning Program
Performance Objectives & Learning Plan
Over 18*

STUDENT INFORMATION (PLEASE PRINT OR TYPE)	
Student Name	DOB
Street Address	
City, State, Zip	
Phone Number and Email Address	
Student Signature:	

SCHOOL INFORMATION (PLEASE PRINT OR TYPE)	
School Name	
Street Address	
City, State, Zip	
Department Head Name	
Trade	
Department Head Signature	Date
Work Based Learning Coordinator Name	
Work Based Learning Coordinator Phone Number and Email Address	
Work Based Learning Coordinator Signature I acknowledge Background Check has been Completed	Date

WORK SITE INFORMATION (PLEASE PRINT OR TYPE)		
Work Site Name		
Street Address		
City, State, Zip		
Mentor Name	Phone Number	Email
Employer/Mentor Signature		Date
State Date	End Date	Starting Wage

Career Learning Tasks	Competency/Source
1. Complies with labor & safety regulations on the job	
2. Exposed to "All aspects of the industry"	
3.	
4.	
5.	

This partnership agreement outlines the basic responsibilities of the student, parent/guardian, worksite & education/community institution in the delivery of this individuals work based learning experience. All responsible parties should read this document carefully and indicate their understanding by signing.

All Parties agree to:

1. Understand and comply with all federal and state regulations regarding employment, safety, worker’s compensation, , minimum wage;
2. Engage the student in the development of an on-going, individual Education and Career Development Plan that reflects the interests, aptitudes and abilities of the student;
3. Support the policies of the school/agency relative to attendance and behavior;
4. Support all rules and regulations of the cooperative business;
5. Participate in the periodic assessment of student progress on the job and achievement of appropriate recognition (grades, credits and/or awards);
6. Ensure that related classroom/program requirements have been met and appropriate work records maintained;
7. Inform all parties in the case of illness, personal emergencies or possible layoff; dismissal from the worksite placement;
8. Prepare, maintain and make available all necessary records required for the Commissioners of Education and Labor and their agents; and
9. Inform all parties of work based learning schedules.
10. Engage the student in the development of an on-going, individual Education and Career Development Plan that reflects the interests, aptitudes and abilities of the student;
11. Support the policies of the school/agency relative to attendance and behavior;
12. Support all rules and regulations of the cooperative business;
13. Participate in the periodic assessment of student progress on the job and achievement of appropriate recognition (grades, credits and/or awards);
14. Ensure that related classroom/program requirements have been met and appropriate work records maintained;
15. Inform all parties in the case of illness, personal emergencies or possible layoff; dismissal from the worksite placement;
16. Prepare, maintain and make available all necessary records required for the Commissioners of Education and Labor and their agents; and
17. Inform all parties of work based learning schedules.
18. CTECS reserves the right to conduct background checks on employers and mentors who may have direct contact with students.

APPROVAL SIGNATURES:	
Administrator Signature	Date
Department of Education Signature	Date
Department of Labor Signature	Date