

LETHBRIDGE SCHOOL DISTRICT NO. 51

OFF CAMPUS EDUCATION

**Andrew Krul (Off Campus Education Coordinator) (403) 894-0375**

[**andrew.krul@lethsd.ab.ca**](mailto:andrew.krul@lethsd.ab.ca)

**Jaye Swanson (Career Practitioner) (403) 892-7884**

[**Jaye.swanson@lethsd.ab.ca**](mailto:Jaye.swanson@lethsd.ab.ca)

**Jacquie Lowe (Admin Support) (403) 394-4621**

[**jacquie.lowe@lethsd.ab.ca**](mailto:jacquie.lowe@lethsd.ab.ca)

**Amanda McMahon (Career Practitioner) (403) 715-1079**

[**amanda.mcmahon@lethsd.ab.ca**](mailto:amanda.mcmahon@lethsd.ab.ca)

***Participating in off campus education is both a privilege and responsibility. Students are expected to comply with company rules and expectations and to the conduct expected of Lethbridge School District 51 students. Significant breaches in either case may lead to the termination of the placement. The student, parent and employer will be informed by the off campus education facilitator if disciplinary action is warranted. If it is a school related issue, no details of the circumstances will be provided to the employer without parent permission.***

**Students:**

1. All work experience must be in Southern Alberta for site visit and worker's compensation guidelines.

2. Complete the one credit **HCS 3000 course** in CALM or through an alternative school delivery.

3. **Complete and return** the work experience agreement form and the student learning plan ASAP to the Career Practitioners office at your school.

4. **Submit** **monthly proof of hours** or they may be emailed to [**jacquie.lowe@lethsd.ab.ca**](mailto:jacquie.lowe@lethsd.ab.ca)**. Also inform us if you are no longer at the worksite.**

5. Perform well at the jobsite: know the employer's cell phone use policy and follow it, be on time, know exactly when the shifts will be, attend work consistently, know the employer's procedures for calling in sick and switching shifts, adhere to any confidentiality expectations and agreements, and be enthusiastic, ethical, consistent and learn.

6. Call the off campus education facilitator **Andrew Krul (403) 894 0375** if there are any concerns about the safety of the jobsite or other concerns.

**Remember:**

* There are 3 levels of work experience (15, 25, 35).
* 10 credits can be earned at each level.
* Only 15 credits count towards your diploma requirements. However, all 30 credits will show up on your transcript and aid in scholarship applications and entrance to university.
* For every 25 hours that you work/volunteer you may receive 1 credit, up to a maximum of 10 credits (250 hours). To receive any credits for work experience you must have a minimum of 75 hours (3 credits).
* You can have more than one work experience contract at the same time. More than 10 credits may be earned at the same work site if there is an increase of responsibilities or a student works in a different department.
* Credits may be earned as part of part time jobs, volunteering or career exploration at job sites. Hours can only be back dated **1 month** from date of supervisor’s signature.

**Employer:**

1. Complete the work experience agreement form and assist the student with developing the learning plan: what will the duties be and what will the student be expected to learn.

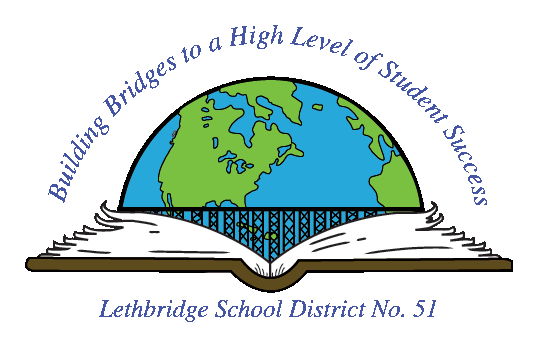
2. Complete the student evaluation at the end of the work experience.

3. Worker's Compensation coverage is provided for student workers by Alberta Education. Report all injuries to the work experience facilitator. Students are covered between 7:00 am and 10 pm on any day of the week. Hours worked beyond these are subject to regulation by the Employment Standards Act.

4. Appropriate initial and on-going safety training is to be provided for the student.

5. The student is to be appropriately supervised.

DISCLAIMER AND INDEMNITY: The employer and the student and his or her parent or guardian (if the student is a minor) agree and confirm that Lethbridge School District 51 shall not be liable for any loss, damages, injury, claim or costs whatsoever arising out of the work. The employer indemnifies LSD 51 and its trustees, employees, agents and the students from any loss, claim damages, injury or costs arising from acts or omissions of the employer or its personnel in respect of the work.

**LETHBRIDGE SCHOOL DISTRICT NO. 51**

Off-Campus Education Agreement

Work Experience/rap/JOB SHADOW

1. **Student**

**Name: Cell #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Job Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Home phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_**

**Email Address:**

**School:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\* HCS3000 is a prerequisite\*\* : Do you have it? Yes No If not, you MUST register in it now.**

Previous Work Experience Agreement? Yes No

1. **Off-Campus Education Partner (Employer)**

**Business Name:**

**Address: Phone:**

**Supervisor’s Name:**

**Supervisor or Business Email Address:**

1. **Student’s Parent/Guardian**

**Name:**

**Address: Phone:**

**Email Address:**

**Terms:**

1. **Parties to the Agreement shall be:**
2. **The Student named in “A” above hereinafter called “The Student Worker.”**
3. **The Off-Campus Education Partner (Employer) named in “B” above hereinafter called “The Community Partner.”**
4. **The Student’s Parent/Guardian named in “C” hereinafter called the “Parent” or “Guardian.”**
5. **The School Board Trustees hereinafter called “The Board.”**
6. **Employment**
7. **The Student Worker agrees to enter the employ of The Community Partner and The Community Partner agrees to employ the Student Worker under The Board’s Off-Campus Education Program, subject to the provisions of this agreement and to the rules or rulings which may be made from time to time by The Board or its representatives.**
8. **A statement of duties shall be set forth by The Community Partner in conjunction with the School Coordinator and The Student Worker shall agree to perform these duties for The Community Partner.**
9. **The Community Partner shall, at the request of The Board or its representatives, evaluate the student on the performance of his or her duties and report on a form supplied by The Board.**
10. **The Community Partner agrees that participation in this program will in no way affect the tenure or job security of any regular employee currently on staff, nor their hiring practices with regard to employees.**
11. **Salary**
12. **Any remuneration paid by The Community Partner to The Student Worker for the working times outlined in this Work Experience Agreement, shall be set at the discretion of The Community Partner.**
13. **Insurance**
14. **Pursuant to the Worker’s Compensation Act, and Regulations or Orders-in-Council made thereunder, the Student Worker participating in this program is deemed to be a worker of the Alberta Government of the purpose or Worker’s Compensation.**
15. **The Community Partner confirms that the Student Worker is covered in the same manner as other employees under the valid general liability and automobile insurance policies.**
16. **Supervision**

**a) It is agreed that, having arranged work experience for the Student Worker as herein set out, The Board’s only other obligation is to maintain contact with the Student Worker and The Community Partner to such an extent as The Board deems adequate or feasible and The Board shall not be liable or any damage or other claim arising out of any act or omission of any other party to this Work Experience Agreement.**

**b) The Community Partner will supervise The Student Worker and The Board shall keep in contact with The Student Worker to assist in the educational aspect of the program.**

**c) Out of school contact, if necessary, is** Andrew Krul (403) 894-0375

1. **Termination**
2. **This Work Experience Agreement may be terminated by any Parties to the Agreement by giving written notice of termination by ordinary mail to the address of the other Parties shown in this agreement.**
3. **Process**
4. **The Student, in a punctual manner will complete and/or submit all of the required material which includes: the Work Experience Agreement/Student Learning Plan, proof of hours worked, The Student Worker Evaluation form – completed by the Supervisor, the work experience reflective paragraph, the HCS3000 Safety Management Systems Module (1 credit prerequisite course for Work Experience), or any other material requested by the Work Experience Coordinator.**

**b) The Assigned Teacher will complete a Job Site Safety Visit, and meet briefly with the Supervisor.**

**c) The Work Experience Coordinator will monitor Student progress by regularly:**

* **Connecting with the Student for brief interviews and updates (email, phone, school visits)**
* **Communicating with the Supervisor (email, phone, work place visits)**

**e) The Supervisor will evaluate the student’s performance by completing The Student Worker Evaluation form.**

**f) The Work Experience Coordinator will determine the final grade as outlined in the Work Experience Information Sheet.**

**I have read the terms of this Work Experience Agreement and I understand and agree to them:**

**X X**

**The Student Worker Parent/Guardian**

**X \_ \_\_\_\_\_\_\_\_**

**Supervisor at the Work Experience Location Off Campus Education Facilitator**

**Date Date**

**This page MUST be adequately completed BY THE STUDENT WORKER.**

**Job Description: (What are the tasks and duties that The Student Worker will perform while on the job?)**

**Learning Plan: (What will The Student Worker be expected to do during and by the end of the work experience placement – skill, function, role, etc.)**

**Materials: (What materials, clothing and tools, etc. will The Student Worker need for the job?)**

**Machinery/Equipment: (What machines and/or equipment will The Student Worker be required to operate? What safety training etc. will be completed by The Student Worker to assist with this?)**

***# of work hours/week \_\_\_\_\_\_\_ + # of school hours/week \_\_\_\_\_\_\_ = TOTAL HRS\_\_\_\_\_\_\_\_ not to exceed 60/WK.***

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** | **Saturday** | **Sunday** |
|  |  |  |  |  |  |  |

**\*\*\*REMEMBER, you must submit monthly proof of hours in the form of your paystub to the Career Practitioner’s office at your school\*\*\***