

WORK-BASED LEARNING APPLICATION

Churchill County School District

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WORK-BASED LEARNING OPPORTUNITIES

In the 2018-19 school year, Churchill County School District will offer a work-based learning program in the following Health Science fields:

- Biomedical
- Community Health Science
- Dental Science
- Emergency Medical Technician
- Health Information Management
- Medical Assisting
- Nursing Assistant
- Pharmacy Practice
- Respiratory Science
- Sports Medicine

Churchill County School District will make every effort to accommodate all requests for an internship. However, internship opportunities are based on the availability of the employers and may not always be possible.

At the end of the rotation students will be able to:

- Describe the kinds of services provided by the department visited.
- Relate the scope of the visited department to the delivery of health care.
- List the various positions within the department.
- List the job responsibilities for the department.
- Understand the costs in time and money associated with becoming qualified to perform the jobs found in the department.

During the rotation the students will see:

- Various procedures and services provided by the visited department.
- Any specific equipment used that is unique to the department.
- The documentation necessary to deliver procedures or services.

During the rotation the students must demonstrate:

- Adherence to all employee work standards.
- Attendance expectations.
- Appropriate dress.
- Credit attainment expectations.

STUDENT QUALIFICATIONS FOR PARTICIPATION IN WORK BASED LEARNING PROGRAM:

Students must be in 11th or 12th grade in order to participate in the work-based learning experience.

Student must have the following items prior to starting any work-based learning opportunities in Health Science:

- Flu Shot
- Immunization Record
- CPR Certification
- First Aid Certification
- Emergency Contact Information
- Observer Application
- Confidentiality Agreements
- Parent/Guardian Consent
- Insurance Waiver
- Transportation Form
- Affiliation Agreement

Compliance will be evaluated throughout program participation.

STUDENT APPLICATION FORM:

While the deadline for the fall 2018 placements has passed, we will do our best to accommodate requests for the spring 2019.

**Churchill County High School Work-Based Learning
STUDENT APPLICATION FORM**

Applicant's Name: _____ Grade: _____

Address: _____ City: _____ Zip: _____

Phone: _____ Date of Birth: Mo. /Day/Yr. _____

Business Name of Employer: _____

Contact Person: _____ Contact Phone: _____

Address: _____ City: _____ Zip: _____

Parent/Guardian Name: _____

Home/Cell: _____ Work Phone: _____

Emergency Contact: _____

Home/Cell: _____ Work Phone: _____

1. Do you have transportation to and from the job site? YES _____ NO _____
2. List CTE classes or career oriented experience you have:
3. List some of your personal strengths that would apply to this career/position:
4. List some of your special skills that would apply to this career/position:
5. What type of job do you prefer and why?
6. Below write a brief statement (50-100 words) explaining how you might benefit from the Work-Based Learning Program.

PROCESS FOR VETTING BUSINESS/EMPLOYER HOSTS/RUBRIC

Employer _____ WBL Coordinator _____

Site Contact _____ Phone _____

Address (City/State/Zip) _____

Work-Based Learning experience offered at your site:

_____ Job Shadowing _____ Internship (paid or unpaid) _____ Career Mentoring

Industry Sector:

_____ Architecture _____ Agriculture _____ Auto Mechanics

_____ Business _____ Construction _____ Culinary

_____ Technology _____ Health Care/Medical Services

Requirements for student participation:

_____ Identification Card _____ Driver License _____ Background Check

_____ Emergency Contact _____ Parent/Guardian Consent _____ Possible Drug Screen

_____ Insurance/Waiver _____ Confidentiality Agreement

_____ Possible Pharmaceutical Check

List any other requirements:

<u>Work-Based Learning Participation Criteria per NRS 389</u>	<u>YES</u>	<u>NO</u>
Environment is culturally diverse and appropriate for students?		
Environment appears safe and safety appears to be a priority supported and documented by policies and operational practice?		
Sexual harassment and whistle blower policies are in place?		
Facility is easily accessible to students?		
Employer agrees to follow training plan and agreement as applicable?		
Employer will designate a primary and secondary supervisor for the student?		
Employer agrees to evaluate the student's performance based on the training plan and agreement?		
If a paid experience, student will be compensated and covered under workers compensation as a regular employee?		
Does the employer employ more than one person? (list the # of employees)		
Is the host site a home-based business? (not permitted under NRS 389.167)		

As an authorized representative of the Churchill County School District, I affirm that I have visited the business and that the employer, and/or representative has agreed to the student placement learning plan.

District WBL Coordinator/Authorized Representative Signature:	Date:
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METHOD TO EVALUATE STUDENT PARTICIPATION AND COMPLETION OF THE PROGRAM

To be completed by the employer:

1. Would you write a letter of recommendation for this student if asked? _____
2. Was the student a hard worker? _____
3. Did they meet all of the job requirements for their position? _____
4. Did the student act/dress appropriately at all times while on the job? _____
5. What was this student's best quality as an employee?

Other comments/feedback you would like to share:

Supervisor's Signature: _____

Date: _____