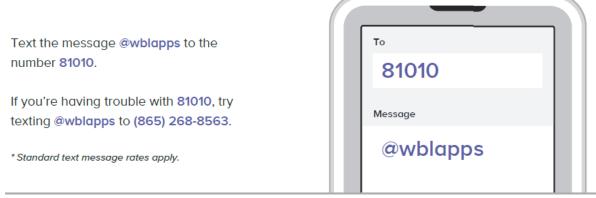
## WBL Application Instructions

(application is on the next page)

Enrollment in *CTE Work Based Learning Career Practicum* requires a completed application to be submitted to **Mrs. Giles in room 236** by **February 14, 2020**. You will need to get signatures and information from others. **Please do not wait until the last minute** to get these—it is unprofessional and disrespectful to do so.

## **Steps to Apply for WBL:**

- 1. Obtain & complete an application for CTE WBL (available on the MHS Website and Mrs. Giles). Make sure you get all required signatures!
- 2. Sign up for Remind texts—I have to do quite a bit of work before you start the course and there are sometimes questions I need to ask of you. Here's how you sign up:



3. Turn the application in to Mrs. Giles in Room 236 by the deadline.

CTE Work Based Learning Career Practicum Application

This page is intentionally left blank.

## **CTE Work Based Learning Career Practicum Application**

Student Information			
Student Full Name:	Date of Birth:		
Student Cell Phone #:	Student Email		
Statent cent none #.	Address:		
Parent/Guardian Name:	Parent/Guardian Phone & Email:		
Grade Level (at the time the course will be taken):	CTE Focus Area:		
Do you need CTE WBL to be in a specific term? (specific term place)	— — — — — — — — — — — — — — — — — — —		
Check below if you meet the requirements (listed below) for taking			
☐ Junior or senior and at least 16 years of age when course b	_		
Reliable transportation to/from the work site.	-6		
Will turn in assignments on time independently.			
<ul> <li>Understand I am required to park on campus and purchase</li> </ul>	a narking nass		
· · · · · · · · · · · · · · · · · · ·	ased learning placement. Placements must be approved by Mrs.		
	oved placement by the 5 <sup>th</sup> day of the term or my schedule will		
be changed.	oved placement by the 3 day of the term of my schedule will		
☐ Have/will have successfully completed at least 2 credits in a	a CTF focus area (nlease list classes helow)		
CTE Class #1			
o CTE Class #2			
<ul> <li>If one of the classes above has not yet been comp</li> </ul>			
☐ My WBL placement duties are/will be <u>related to the CTE fo</u>			
Focus Area Teacher Recommendation: Work Based Learning is an aback page).  Focus area teacher signature:			
policies, students in the CTE WBL Career Practicum must m that occur on or off MHS campus that are deemed unethic campus component of the course.  I understand that this class is a time commitment above an	ege. Above and beyond adhering to MHS and MCS rules and aintain and reflect ethical and professional conduct. Behaviors al, illegal, or unprofessional will result in removal from the off-d beyond simply working hours. There are assignments such as tc. that I will be required to complete independently (without		
I am interested in completing a/an: ☐ Paid WBL Placement	□ Unpaid Internship □ Other		
Do you currently work or do you already have a work placement a			
If yes, where have you arranged placement?			
Supervisor name:			
Supervisor phone:			
Supervisor email:			
May we contact this employer? ☐ Yes	S □ No		
Have you ever been fired from a job? ☐ Yes	$_{\mathrm{o}}$ (provide a detailed explanation) $\square$ No		
If you do not have placement arranged, have you begun your job s I've already applied at (list all) I plan to apply at (list all)			
Have you ever been assigned detention (in school or after school)	or suspended from school? ☐ Yes (provide explanation) ☐ No		

## **CTE Work Based Learning Career Practicum Application**

STUDENT AND PARENTAL SIGNATURE/ACKNOWLEDGMEN	Т:				
I have read the course requirements above and can comply with them. I certify that all information on this application is true and correct. I acknowledge that upon discovery of misleading or false information, my application will be null and void. In addition, if acceptance into the course is based on misleading or false information, it will be sufficient grounds for immediate dismissal from the					
				class, regardless of date or tenure within the school term.	
				Student signature:	Date:
Parent/guardian:					
	Application, including the course requirements, and give permission for				
my child to enroll in the CTE Work Based Learning course next year. I understand that they must have transportation, health and auto insurance coverage, legal eligibility to work, and there may be additional requirements which will be communicated to me via					
					erm. Maryville City Schools does not make employment decisions for
child, parents should investigate each business to determine	ccurring at these businesses. Like any employment decisions for their e if it is appropriate for their child.				
Parent/Guardian signature:					
Please print parent/guardian name:					
Parent contact information: (phone number and email)					
For Selection Committee	Use Only (Do not write in this box)				
	cions should be considered before recommending a student's WBL				
application:					
• •	us area classes? Students must demonstrate appropriate academic proficiency and skills				
in their focus area courses before being placed in this program.					
<ul> <li>How was this student's attendance? Students must show up t</li> <li>How well did this student interact with other students in the d</li> </ul>	to their work site regularly.  class? Students must be able to work well with others in a team environment.				
	tion in a positive manner? Students must be responsible and able to take direction from				
supervisors.					
• • • • • • • • • • • • • • • • • • • •	y? As a program, we must be able to build relationships with partners in the community.				
Students in this program represent MHS as well as determine whether a community partner will accept future WBL students.  • Can the student work on assignments responsibly and independently? This class does not meet on a regular basis with the teacher and students must					
be able to complete assignments on the LMS independently an	d without classroom reminders.				
I recommend this student for CTE WBL Career Practicum:					
☐ Without reservation					
☐ With reservation (Please attach additional requirements/forms that the student must complete in order to receive a					
recommendation for WBL along with a deadline)					
□ <b>Not recommended at this time</b> (Please note a focus area class that would be a more appropriate placement for this					
student:)					
Focus Area Teacher Signature:	Date:				
Only students who represent our school well will be appro	ved for WBL opportunities. Employers seek people who are				
dependable (attendance records), who get along with other					
□ Attendance	□ Discipline				
Comments:					
WBL Participation: ☐ Approved ☐ Denied					
WBL Coordinator Signature:	Date:				