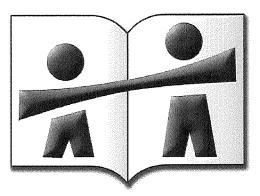
Work Experience 12B Non-Paid Work Placement

CENTRAL OKANAGAN PUBLIC SCHOOLS



Together We Learn

Once a student has completed WEX12A – they are able to complete WEX 12B by learning new skills at their existing Work Experience placement or finding another placement. The attached documents must be completed outlining the new skills you will be learning.

Each Work Experience student must complete the following:

Pre-Placement:

- Intent to Complete Orientation
- WCB Agreement Form (Completed)

During Placement:

- Student Safety Checklist completed during first visit
- Track Work Hours

Post-Placement:

- Employer Evaluation and Hour Verification
- Student Self Evaluation
- Evidence of Learning (Report, Conversation with your WEX
 12 teacher, etc)

CENTRAL OKANAGAN PUBLIC SCHOOLS



Work Experience 12 Intent to Complete



Student Name:		Cell Phone #:
-mail:		
Work Experience provide students with o skills and gain valuable career experie	ences that go beyond what stude	12 (WEX12) learning to the world of work. Students learn newents learn in school. Work Experience prepares econdary education and employment.
Students may use one or a combina	WEX 12 Pathways ation of all three of the below pa	thways to satisfy their WEX12 requirements
Non Paid Work Placement set up through the Career Center	Paid Employment Part-time jobs	Career Experiences see your Career Center
Non-paid professional placement at a worksite where the students are given the opportunity to participate in, observe or learn about the performance of tasks and responsibilities related to that career	Students may use their current p time jobs. A Training Plan must submitted <i>before</i> hours can b approved	be through your school's Career Center
EngineerVet assistantPhysiotherapist	RestaurantsGas StationsGrocery Stores	 Project Placements Job Shadows Conferences/Events Spotlight Sessions
Paid Employment Career Experiences	(Area of Interest:	
y signing below, you are confirming the ear and want to receive credits for Wo		least 100 hours of work experience this sch
tudent Signature:		Date:
FFICE USE ONLY: attach the following (A		Student Check in Student Evaluation
☐ October 1st Student Schedule ☐ WCB Agreement Form ☐ Employer Check in		Employer Evaluation & Hour Verification Signature Evidence of Learning

Student Check in (TEACHER USE ONLY)

The following items below have been completed: Intent to Complete WCB Agreement Form (Authentic Work Placement) Hours: (see Career Centre Manager for complete list of hours) Paid Employment ____/hrs Non Paid Work Placement ____/hrs ____/hrs Career Experiences ____/hrs **Total Hours** Student Evaluation Employer Evaluation & Employer Hour Verification Evidence of Learning Student has completed WEX12B Comments: Employer Check in Date: Text Visit Phone Email Comments: WEX 12 Teacher: Student: Signature: Signature: Date: Date:

CENTRAL OKANAGAN PUBLIC SCHOOLS



WEX 12 Teacher Signature: _

Work Experience 12



Evidence of Learning, Evaluations and Assessment

St	udent Name:Date
Th	e following items must be completed and attached:
	 Evidence of Learning (Report, Verbal Discussion etc) Student Evaluation (see reverse) Employer Evaluation and Hour Verification Signature (see reverse)
	Evidence of Learning
	Please discuss with your teacher how you will share your evidence of learning. In this evidence, please answer the following questions
	Describe where you worked and what you did. Give an overview of your job, tasks, assignments, routine duties, etc.
2.	What skills have you learned at school that you were able to apply to this work placement?
3.	What new skills did you learn at your work placement?
1.	Give examples of successes you experienced at this work placement.
5.	Give examples of any challenges you encountered, and explain how you overcame them.
6.	How has this experience influenced your future personal, educational, and career goals?
	How has this experience attributed to your growth as a 21 st Century Learner? (Relate this to one or more of School District Attributes of a Learner – <i>Thinker, Innovator, Collaborator, Contributor, Learne</i>
	DFFICE USE ONLY: Student Assessment Criteria
	Hour Completion & Evidence of Learning/40
	WEX12 Document Completion/30
	Employer Evaluation/20
	Student Self Evaluation/10
	FINAL MARK:/100

Date:

STUDENT SELF EVALUATION

Please complete the following evaluation for your Work Experience Placement

I can effectively communicate			NA	1	2	3	4
I can manage information			NA	1	2	3	4
I can solve problems and make decisions			NA	1	2	3	4
I have a positive attitude towards one's duties			NA	1	2	3	4
I can display positive "work ethic" such as confidentiality, regular	attendance, punctu	ality, honesty,	NA	1	2	3	4
trustworthiness, responsibility, etc.							
trustworthiness, responsibility, etc. I can respect diversity and individual differences			NA	1	2	3	4
•		AMAZIA AMAZIA	NA NA	1	2	3	4
I can respect diversity and individual differences				1 1 1			4 4
I can respect diversity and individual differences I can carry out multiple tasks and identify alternatives			NA	1 1 1	2	3	4

EMPLOYER EVALUATION

Please evaluate this Work Experience Student, and if possible, discuss with the student Use the four-point scale below

NA	Not Applicable 1 Needs Improvement 2 Satisfactory 3 Above Av	erage	4	Exce	llent	
•	effective communication skills	NA	1	2	3	4
•	manages information	NA	1	2	3	4
•	problem-solving and decision-making skills	NA	1	2	3	4
•	a positive attitude towards one's duties	NA	1	2	3	4
•	a "work ethic" including confidentiality, regular attendance, punctuality, honesty, trustworthiness,	NA	1	2	3	4
	responsibility, etc.					
•	a respect for diversity and individual differences	NA	1	2	3	4
•	ability to carry out multiple tasks or identify alternatives	NA	1	2	3	4
•	the ability to function as an effective team member	NA	1	2	3	4
•	learns from mistakes and accepts feedback	NA	1	2	3	4
•	the ability to perform work in a safe manner	NA	1	2	3	4

What are the student's main strengths?

What are your recommended areas for further development and growth?

Other comments:

This student has completed	_hours of work at		_ (your worksite).
Supervisor Name:	A CONTRACTOR OF THE CONTRACTOR	Supervisor Signature:	



School District No. 23 (Central Okanagan)

WORK EXPERIENCE EDUCATION PROGRAM PLACEMENT AGREEMENT

ne "Board of School Trustees of School istrict #23" the "School Board"		The "Student"		The "Work Site Employer"				
Name of Cohool		Name of Student			Business	Name of Work Si	ite Employer	
Name of School								
Name of Principal		Home Address	Cit	у	Business	Address		
		Postal Code	Hor	ne Telephone	City		Postal Co	de
School Address								
City	Postal Code	Name of Parent/Gu	ardian		Address o	f Work Site(s) if	different	
		Address (if different	from above)		City		Postal C	ode
Telephon	Fax							
Principal's Signature)	City	Postal Code	Telephone	Business	Telephone	Fax	
	<u> </u>	Student Signature			Employer	Signature		
Work Experience Teacher's S	oigilaare	Describe and a silver						
	- () .	Parent/Guardian Sig	gnature					
*By their signatures the p	parties signify their a	reement to the te	rms and cond	litions set out l	elow.	Dated	20	
	a medical condition						tiality Training Comp	
The parties agree to a wo		ent (the "work ex	perience plac	ement") for the	Student v	vith the Work	Site Employer on	the
Terms of Agreement:	This Agreement will be	in effect free)	until		unless it	is ended at an earli	or tim
2. Student Duties:	The Student agrees to	perform without payme		assigned to the St	udent from t	ime to time by the	e WorkSite Employe	er in
	consultation with the So	chool Board's corresent	tatives. The Stu	ident agrees to co	mply with th	e Work Site Emp	oloyer's rules and all	
3. Days and Hours:	applicable safety regula	norform those duties	guiations are	s to be communic	ated by the	work site Embio	yer to the Student.	
wars allu Hould.			assig d by the	e Work Site Empl	over in acco	rdance with para	graph 2 on the days	and
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o. Dayo and Hours.	or at such other times.	in writing, as may be a	assign by the	e Work Site Empl	oyer in acco School Boan	rdance with para Hours:_ d, and Student.	graph 2 on the days	
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Safety Orientation for Work Experience

understand your responsibilities — and those of others. If you'	•
Your rights:	Initial (that you have read your rights):
The <u>right to know about hazards</u> in the workplace	
The <u>right to participate in health and safety activities</u> in the wo	rkplace
The <u>right to refuse unsafe work</u> without getting punished or fire	ed
 Your responsibilities: As a worker, you play an important role in making sure on the job. As a worker, you must: Be alert to hazards. Report them immediately to your some Follow safe work procedures and act safely in the work. Use the protective clothing, devices, and equipment procedures with joint occupational health and safety of WorkSafeBC prevention officers, and anybody with health and safety control worksafeBC prevention officers, and anybody with health work-related. Follow the treatment advice of health care providers. Return to work safely after an injury by modifying your regular responsibilities. 	place at all times. ovided. Be sure to wear them properly. ommittees, worker health and safety representatives, alth and safety duties. ob and tell the health care provider that the injury is

Discrimination and Harassment:

What is discrimination? In British Columbia, it is discrimination if you are treated badly or denied a benefit because of a personal characteristic. Examples of discrimination:

Initial (that you have read your responsibilities above)

Never work under the influence of alcohol, drugs or any other substance, or if you're overly tired.

- Firing a woman because she is pregnant
- Refusing to rent an apartment to a couple because they are gay
- Refusing to hire someone because of a physical or mental disability
- Paying a woman less than a man who is doing the same job
- Forcing an employee to retire because of the person's age

What is harassment? Harassment is a form of discrimination. It can be words or actions that offend or humiliate you. It is harassment when someone repeatedly says or does things to you that are insulting and offensive. The Code protects you when harassment is based on a protected characteristic listed under "How am I protected".

There are many types of harassment. Examples of harassment

- Unwelcome sexual suggestions or requests
- Unwelcome touching or physical contact
- Staring at or making unwelcome comments about someone's body
- Jokes based on gender, sexual orientation, or racial stereotypes
- Comments that make fun of or insult people because of their sex, pregnancy, race or physical or mental disability

Student signature	Date:
Teacher signature	Date: