

Emanuel County Schools
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Portfolio: WBL Paperwork



_____SHS _____ECI

CNET Information

Student: please print the following information

Student Name: _____

Graduation Year (circle one): **2023** **2024** Other: _____
Pathway completed during high school: ___Ag ___FACS ___Business ___Tech/Engineering
Other Pathway: _____

Career Goal (what do you want to be when you grow up): _____

Employer: please print the following information

Business/Organization: _____

Business/Organization Address: _____

Business/Organization Phone #: _____

Business/Organization Email Address: _____

Supervisor Name: _____

Mentor Name (if different than supervisor): _____

Student Job Title: _____

First Date of Employment: _____

Hourly Wage: \$_____

Typical Work Days (ex. Mon-Fri): _____

Typical Work Hours (Ex. 4pm-8pm): _____

Average Hours Per Week: _____

Initial Training Plan

To provide the best learning experience for the student-worker, the employer agrees to provide a variety of work experiences that will contribute to the attainment of their career objective. ***Please list the specific tasks/duties that students will perform throughout the job placement this year. Please include tasks that students may learn how to do even if they won't perform them initially.***

<p>Employability and Soft Skills are expected of every person in every workplace. <i>Do not repeat these in the job duties box.</i></p> <ol style="list-style-type: none"> 1. Shows respect to employer and other co-workers. 2. Works well and cooperates with others. 3. Demonstrates effective leadership skills. 4. Maintains appropriate personal appearance and follows dress code policy of the organization. 5. Displays efficient time-management skills when completing tasks. 6. Demonstrates effective verbal and written business communication skills. 7. Reports to work promptly when scheduled. 8. Demonstrates responsible behavior. 9. Produces quality work. 10. Displays honesty and integrity. 	<p>Please list specific job duties that will be performed on the job by the student:</p> <ol style="list-style-type: none"> 1. 2. 3. 4. 5. 6. 7. 8. 9. 10.
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Safety Training Confirmation

This certifies that this student in the Work-Based Learning program of the Emanuel County School System and an employee at our company has completed the necessary safety training for the current position of employment. The employer certifies that the proper procedures related to the job requirements have been shown to the student and that in the case of an emergency the student has been given instructions on what to do to resolve the situation. The student understands that failure to comply with these safety procedures may result in personal injury or in injury to others. The student agrees to follow all the safety rules and regulations of the current employer.

Employer/Mentor Signature: _____ Date: _____

Student Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

WBL Coordinator Signature: _____ Date: _____

INSTRUCTOR USE ONLY:

WBL Placement: _____ COOP _____ ESD _____ INTERN _____ YAP _____ GPP _____ Vision 2020