

# WORK EXPERIENCE Student Package

Revised: September 2016

# Each Work Experience file should include at least the following:

### **Pre-Placement:**

- Student-Teacher-Supervisor Interaction Log
- Work Experience Agreement Form (completed)
- WorkSafe BC Employer Clearance Letter
- Worksite inspection Sheet (completed)
- WCB "Right to Refuse Unsafe Work" form (completed)

### **During Placement:**

- Student-Teacher-Supervisor Interaction Log (updated)
- Student Safety Checklist (completed during first visit)
- Work Experience Training Plan (completed during first week)
- Work Experience Time Log Summary (updated)

### Post-Placement:

- Student-Teacher-Supervisor Interaction Log (complete)
- Work Experience Time Log Summary (complete)
- o Employer Evaluation of Work Experience
- Student Evaluation of Work Experience
- Student Reflection Journal
- Student Resume
- Final Assessment

### Student-Teacher-Supervisor Interaction Log

This document provides a way for WEX teachers to record interactions between themselves and their student, and between themselves and the work experience placement supervisor.

Date	Contact	Information



### Career Education

3461 Henderson Road Victoria, B.C. V8P 5A8 Tel: (250) 475-4182 Fax: (250) 475-4115

# WORK EXPERIENCE AGREEMENT FORM

STUDENT INFORMATION	SCHOOL INFORMATION			
Name:	School:			
Address:	Address:			
Postal Code:	Phone:			
Home Phone #:	Fax:			
Student Cell Phone #:				
Birth date:/ Grade: Sex:	Unpaid WEX $\square$ Paid WEX $\square$			
Parent/Guardian(s):	Program: Career Prep □ ACE IT □ Other □			
Parent Cell Phone #:				
	Program Teacher:			
SUPERVISING EMPLOYER INFORMATION	FREEDOM of INFORMATION & PROTECTION of PRIVACY ACT			
Business Name:	The information collected on this form is required and will be used solely for the purpose of administering the Work			
Address:	Experience Agreement. It will be kept secure and			
Postal Code: Phone:	confidential, in accordance with the Freedom of Information and Protection of Privacy Act. Any questions concerning the			
Cell: Fax:	collection and use of this information may be directed to your school Principal.			
Email:	TRANSPORTATION			
☐ This worksite is covered by WCB	The parties agree that the parent/guardian(s) and the			
Supervisor's Name:	student are solely responsible for the student's transportation to and from the work site. If the School			
Supervisor's Position:	Board or Work Site Employer is providing transportation, describe and attach separately.			
SIGNATURES	WORK PLACEMENT DETAILS			
All signatures are required	Dates: 20			
to validate the agreement.	To: 20			
Community in the second	And/or: 20			
Supervisor:	To:			
Union Rep (if applicable):	Work Hours: From to			
Student:	Mon: □ Tues: □ Wed: □ Thurs: □ Fri: □ Sat: □ Sun: □			
Parent/Guardian:	Duties:			
Teacher:				
Principal:				
Date:				

### TERMS of AGREEMENT for UNPAID Work Experience

#### All parties agree to a work experience placement on the following terms and conditions:

- 1. **Terms of Agreement:** This Agreement will be in effect as specified in the placement details as indicated.
- 2. **Days and Hours:** The student agrees to perform those duties as assigned by the work site employer as stated in the placement details of this agreement. Amendments to the Agreement must be registered with the District Career Education Office.
- 3. **Minimum Age:** The parent/guardian(s) of the student warrant that the student is 14 years of age, or older, at the date of this Agreement.
- 4. **Notice of Injury:** The work site employer will, if a student is injured, immediately report the occurrence of injury to the School board by contacting tile Program Teacher/Principal.
- 5. **Student Duties:** The student agrees to perform, without obligation of payment, those duties assigned to the student from time to time by the work site employer, in consultation with the School board's representatives. The student agrees to comply with the work site employer's rules and all applicable safety regulations. (Special Rules or Regulations are to be communicated by Employer to Student).
- 6. **Supervision:** The student agrees to be under the direct supervision of the work site employer, who agrees to supervise the student at all times during the work experience placement.
- 7. **Site Safety Orientation:** The work site employer will provide to the Student site, equipment and work specific safety training and will not permit the student to perform any duties unless the student has all safety equipment and training required for the tasks to be performed.
- 8. **Board Access:** The work site employer agrees to allow School Board representatives to have access at any time to the work site and the student.
- 9. **Evaluation:** When requested by the School Board, the work site employer will evaluate the performance of the student's duties, report that evaluation in the form required by the School Board, and consult with the School Board representatives about the evaluation.
- **10. Workers' Compensation Act Injury Coverage:** Students in a work experience placement at a standard work site are covered by the Workers' Compensation Act and are considered to be workers of the Government of the Province of British Columbia for Workers' Compensation purposes only. Coverage is limited by the terms and conditions set out in the Minutes of the Workers' Compensation Board dated January 29, 2008.
- 11. Liability of Board: All parties acknowledge and agree that the School Board: (a) does not assume any responsibility for the actions of the student, and that the School Board is not responsible for any loss, damage, injury, or expense (collectively, "loss") suffered by the work site employer, the work site employer's employees or other persons which may be caused by any act or omission of the student. The School Board will not reimburse the work site employer or others for any such loss; (b) does not assume any responsibility for the actions of the work site employer, the work site employer's employees, or other persons with whom the student might come into contact through this work experience placement; and (c) is not responsible for any loss suffered by the student or the parent/guardian(s) of the student arising out of its employees acting within the scope of their employment.
- **12. Insurance:** The School Board maintains coverage with respect to its liability and that of a student participating in a work experience placement contemplated by the terms of this Agreement. This coverage is subject to exclusions, terms and conditions and deductible amounts. All other parties to this Agreement may inspect the terms of the School Board's coverage from time to time.
- **13. Effect on Employees:** The work site employer agrees that the placement of the Student will not affect the job security of any employee of the work site employer and will not affect the work site employer's hiring practices. The placement of the student will be in addition to the work site employer's full complement of employees. The student will not be a replacement for any employee.
- **14. Termination of the Agreement:** Any party to this Agreement may end it at any time by giving notice in writing to all other parties at the addresses given in this Agreement.
- **15. Reference:** In this Agreement, a reference to the School Board includes: School Board officers, employees or representatives acting within the scope of their employment.

Note: Students who are enrolled in programs authorized by the Ministries of Education, Skills & Training & Labour have been exempted from the Minimum Wage Act.

### TERMS of AGREEMENT for PAID Work Experience

### All parties agree to a PAID work experience placement on the following terms and conditions:

- 1. **Terms of Agreement:** This Agreement will be in effect as specified in the placement details as indicated.
- 2. **Days and Hours:** The student agrees to perform those duties as assigned by the work site employer as stated in the placement details of this agreement. Amendments to the Agreement must be registered with the District Career Education Office.
- 3. **Minimum Age:** The parent/guardian(s) of the student warrant that the student is 14 years of age, or older, at the date of this Agreement.
- 4. **Notice of Injury:** The work site employer will, if a student is injured, immediately report the occurrence of injury to the School board by contacting tile Program Teacher/Principal.
- 5. **Student Duties:** The student agrees to perform those duties assigned to the student from time to time by the work site employer, in consultation with the School board's representatives. The student agrees to comply with the work site employer's rules and all applicable safety regulations. (Special Rules or Regulations are to be communicated by Employer to Student).
- 6. **Supervision:** The student agrees to be under the direct supervision of the work site employer, who agrees to supervise the student at all times during the work experience placement.
- 7. **Site Safety Orientation:** The work site employer will provide to the Student site, equipment and work specific safety training and will not permit the student to perform any duties unless the student has all safety equipment and training required for the tasks to be performed.
- 8. **Board Access:** The work site employer agrees to allow School Board representatives to have access at any time to the work site and the student.
- 9. **Evaluation:** When requested by the School Board, the work site employer will evaluate the performance of the student's duties, report that evaluation in the form required by the School Board, and consult with the School Board representatives about the evaluation.
- 10. Workers' Compensation Act Injury Coverage: Students who use paid employment supported and monitored by the school to earn credits for elective work experience courses must show that they are working at a site where WCB coverage is provided. WCB coverage for any paid work experience must be covered by the employer, and will not be covered by the Province.
- 11. Liability of Board: All parties acknowledge and agree that the School Board: (a) does not assume any responsibility for the actions of the student, and that the School Board is not responsible for any loss, damage, injury, or expense (collectively, "loss") suffered by the work site employer, the work site employer's employees or other persons which may be caused by any act or omission of the student. The School Board will not reimburse the work site employer or others for any such loss; (b) does not assume any responsibility for the actions of the work site employer, the work site employer's employees, or other persons with whom the student might come into contact through this work experience placement; and (c) is not responsible for any loss suffered by the student or the parent/guardian(s) of the student arising out of its employees acting within the scope of their employment.
- **12. Insurance:** The School Board maintains coverage with respect to its liability and that of a student participating in a work experience placement contemplated by the terms of this Agreement. This coverage is subject to exclusions, terms and conditions and deductible amounts. All other parties to this Agreement may inspect the terms of the School Board's coverage from time to time.
- **13. Termination of the Agreement:** Any party to this Agreement may end it at any time by giving notice in writing to all other parties at the addresses given in this Agreement.
- **14. Reference:** In this Agreement, a reference to the School Board includes: School Board officers, employees or representatives acting within the scope of their employment.

### WorkSafe BC Employer Clearance Letter

- 1. Go to the WorkSafe BC site: www.worksafebc.com
- 2. Select Get a Clearance Letter under Insurance on the home page
- 3. Scroll down and click the yellow box labelled **Get a Clearance Letter** under the heading *Public access to clearance letter*
- 4. In **Step 1: Tell us who is requesting the letter** enter the information in the required fields:
  - a. Legal Name: Greater Victoria School District #61
  - b. WorkSafeBC account number: 037599
  - c. Address, City, Postal Code: Home School Address
  - d. Phone Number: Home School Phone Number
  - e. Email Address: Work Experience Coordinator's Email Address
- 5. In Step 2: Find firm(s) for the letter
  - a. Click the Search button
  - b. Select Legal Name or Trade Name
  - c. Enter the name of the business in the field provided. Click the **Search** button
  - d. Scroll down to find out if the Employer's WorkSafe BC record has been found
  - e. Click the **Select** box beside the desired business name
  - f. Click on the **Done** button
- 6. Click yellow box labelled **Create Clearance Letter** (bottom left hand corner)
- 7. **Review** the clearance letter. The status of the employer must be 'active and in good standing'. Also stated in bold, is the date in which the business' coverage is guaranteed until till. If this date occurs before the student is finished their work experience, it is recommended that another clearance letter be printed off to ensure proper coverage.
- 8. If the above requirements are satisfied, print a copy and place it in the student's work experience file. If the above requirements are not satisfied, phone the Career Program's office at 250-475-4182.

Completed by the Work Experience Coordinator

### Work Experience Training Plan

Company/Employer:	Stu	udent:		
Supervisor:	WE	WEX Teacher:		
Student Focus Area (check on	ne of the boxes)			
Business and Applied Business Fitness and Recreation (XC) Liberal Arts and Humanities (XE Tourism, Hospitality and Foods	Heal	Arts, Design and Media (XB) th and Human Services (XD) nce and Applied Science (XF) es and Technology (XH)		
Dates/Hours to be worked by	student:			
DATES: FROM WORK HOURS: FROM				
The following section  Please describe at least three describes at leas	•	eted by the company supervotes that the student will perform	during their	
Please list at least five employa placement (what you would look	•		ing their	
Please describe any skills the s	tudent will learn that	are specific to this workplace/s	site:	
Supervisor Signature:	Teacher Signature:	Date:		
Student Signature:	Parent/Guardian Sig	gnature: Date:		

### WORK SITE INSPECTION SHEET

Employer: WorkSafeBC #:				
Supervisor:	WEX Teacher:			
Teacher Signature:	Date:			
In evaluation of the worksite, please bear in min  1. the provision of a safe work	the site supervisor for the student			
PLEASE CHECK THE APPROPRIATE DESCRIPT	ION.			
<ul> <li>This is a <u>standard worksite</u> (where a worker perf career under supervision of a worksite employer</li> </ul>	•			
☐ This is a non-standard worksite (a location creat	OR ed by the school district for the purpose of providing condary placement in which the student participates			
• • • • • • • • • • • • • • • • • • • •				
Safety attire and/or equipment required:				
This worksite is: ☐ Recommen	nded			

## Occupational Health and Safety Regulation 3.12: The Right to Refuse Unsafe Work

- 1. A person must not carry out or cause to be carried out any work process or operate or cause to be operated any tool, appliance or equipment if that person has reasonable cause to believe that to do so would create an undue hazard to the health and safety of any person.
- 2. A worker who refuses to carry out a work process or operate a tool, appliance or equipment pursuant to subsection (1) must immediately report the circumstances of the unsafe condition to his or her supervisor or employer.
- 3. A supervisor or employer receiving a report made under subsection (2) must immediately investigate the matter and
  - a. ensure that any unsafe condition is remedied without delay, or
  - b. if in his or her opinion the report is not valid, must so inform the person who made the report.
- 4. If the procedure under subsection (3) does not resolve the matter and the worker continues to refuse to carry out the work process or operate the tool, appliance or equipment, the supervisor or employer must investigate the matter in the presence of the worker who made the report and in the presence of
  - a. a worker member of the joint committee,
  - b. a worker who is selected by a trade union representing the worker, or
  - c. if there is no joint committee or the worker is not represented by a trade union, any other reasonably available worker selected by the worker.
- 5. If the investigation under subsection (4) does not resolve the matter and the worker continues to refuse to carry out the work process or operate the tool, appliance or equipment, both the supervisor, or the employer, and the worker must immediately notify an officer, who must investigate the matter without undue delay and issue whatever orders are deemed necessary.

Student:	
Signature:	Date:
Work Experience Coordinator:	
Signature:	Date:

### **Student Safety Checklist**

Company/Employer:		Date:					
Stu	dent:	Supervisor:					
Stu	dent Signature:	Supervisor Signature:					
#	Task		YES	NO	N/A		
1.	I was given an orientation regarding workplaction.	e safety and generic risks of this					
2.	Hazards and risks specific to this workplace vorientation (physical, chemical, biological etc.	9					
3.	I have reviewed the emergency procedures (f employer. They are:	ire, earthquake) with my					
4.	I know the location of the fire extinguisher and Describe location:	d fire alarm.					
5.	I have been informed of who health and safet are:	y committee members are. They					
6.	I have been informed of the WHMIS procedur	res at my worksite. They are:					
7.	I know where the incident report forms are sto	ored. Describe the location					
8.	I have been informed that Personal Protective List:	e Equipment IS / IS NOT required.					
9.	I have reviewed worksite policies on dealing vapplicable).	with robberies and/or shoplifting. (if					
10.	I have requested that I will be trained on any use. Possibly:	machinery or equipment prior to					

### Student Safety Checklist continued...

#	Task	YES	NO	N/A
11.	When in doubt about how to do something safely, I will ask before I begin.			
12.	I have been informed that I WILL BE / WILL NOT BE working alone.			
13.	I have been taught proper lifting procedures/ergonomics. (if applicable).			
14.	I have been taught proper techniques for working from heights. (if applicable)			
15.	Have you been made aware of any potential dangers or hazards, such as air quality, noise levels, tripping hazards, etc? They are:			
16.	I have discussed the WorkSafe BC accident or injury procedure.			
17.	I know who I should report workplace hazards / injuries to. They are:			

EMERGENCY INFORMATION			
First Aid Attendant:			
Outline the procedures at your work site if you are injured:			
<u>Step 1</u> :			
Step 2:			
Step 3: Receive first aid and / or be transported to a doctor or hospital, as required.			
Step 4: Report to parents and school immediately.			
Step 5: Complete all forms and contact WorkSafe BC within 72 hours of injury.			

### **Student Time Log**

Student: _		Supervisor:				
Student Signature:		Supervisor Signature:				
WEX Teach	ner:	Teacher Signature:				
Date	Location	Duties Performed	Hours			
		TOTAL HOURS:				

### **Employer Evaluation**

Student:			Supervisor:				
	of Work Experience:		Company/Employer				
Student Signature: Supervisor			nature:		Date:		
Duties	s Performed:						
	e evaluate this work experie	THIS EVALUATION V	VITH TH			if possible	, DISCUSS
	4 – Outstanding 3 – Go			Improveme	ent N/A –	Not Applic	able
		PERSONAL & SO	CIAL Q	UALITIES			
*	Cooperative: able to work w		4	3	2	1	N/A
	Accepting of constructive cri		4	3	2	1	N/A
	Adaptable to new tasks/situa		4	3	2	1	N/A
*	Respectful of others		4	3	2	1	N/A
*	Appropriately groomed		4	3	2	1	N/A
*	Demonstrates a positive atti	tude to job	4	3	2	1	N/A
*	•	ısm	4	3	2	1	N/A
*	Punctual		4	3	2	1	N/A
*	Attends regularly		4	3	2	1	N/A
		QUALITY of WORK	and WC	RK HABITS	3		
*	Reliable/Responsible		4	3	2	1	N/A
	Shows good work ethic		4	3	2	<u>·</u> 1	N/A
	Shows initiative: self-starter		4	3	2	1	N/A
*	Able to follow directions		4	3	2	1	N/A
*	Completes assigned tasks		4	3	2	1	N/A
*	Able to solve problems		4	3	2	1	N/A
*	Aware of safety practices		4	3	2	1	N/A
*	Uses technology effectively		4	3	2	11	N/A
		COMMUNICA	TION SI	ZII I S			
*	Speaks clearly	COMMONICA	4	3	2	1	N/A
*	Listens well		4	3	2	1	N/A
*	Uses appropriate body lange	lade	4	3	2	<u>·</u> 1	N/A
*	Writes clearly and legibly	go	4	3	2	1	N/A
		·					
*	Overall work performance	FINAL ASS		NT 3	2	1	N/A
	Overall work performance		4	<u> </u>		1	IN/A
Recom	mendations for improvement	and additional comme	ents (if p	ossible, refe	r back to the	Training Pla	n)

### Student Self-Evaluation

Stude	udent: Total Hours:					
	of Work Experience:to	Company/Employer:				
Stude	nt Signature: Date:					
Job D	Description:					
	te yourself by circling the number which be Outstanding 3 – Good 2 – Fair	1 – Need	s Improven			
	PERSONAL &	•		0	4	NI/A
*	Cooperative Abilities (teamwork)  Acceptance of constructive criticism	<u>4</u> 4	3	2 2	1	N/A N/A
*	Appearance Appearance	4	3	2	1	N/A
*	Punctuality	4	3	2	1	N/A
*	Attendance	4	3	2	1	N/A
*	Courtesy (with public and coworkers0	4	3	2	1	N/A
*	Dependability and responsibility	4	3	2	1	N/A
		ALITIES & I				
*	Effort (initiative, eagerness, effectiveness)	4	3	2	1	N/A
*		4	3	2	1	N/A
*	Follow through (completing tasks, projects)	4	3	2	1	N/A
	COMMUN	IICATION S	KILLS			
*	Verbal (speaking clearly)	4	3	2	1	N/A
*	Listening (able to follow directions)	4	3	2	1	N/A
*	Questioning (asking appropriate questions)	4	3	2	1	N/A
*	Non-verbal (eye contact, body language)	4	3	2	1	N/A
*	Written (writing clearly, concisely & legibly)	4	3	2	1	N/A
	ibe any specific work skills learned during y			rement:		

### **Work Experience Reflective Journal**

To successfully complete your Work Experience course, you must complete a reflection activity that enables you to reflect on the experience you had at your work placement. The following outline is to guide you in the completion of this activity. You are encouraged to be creative but all sections must be included. In addition, the journal must be at least 500 words in length, type written.

### 1) WHAT I LEARNED ABOUT MYSELF

Use the prompts below to complete this section

- The best part of my work experience was ...
- I was surprised to discover that...
- I was encouraged to learn that...
- I was disappointed to learn...
- When I made a mistake I was able to learn from it by...
- The skills and personality needed to work in this job include...
- This experience led me to understand more about myself because...

### 2) SKILLS I HAVE LEARNED AS A RESULT OF MY WORK EXPERIENCE

List your top five skills in each of the following categories

- Transferable
- Technical
- Self-Management

### 3) POSITIVELY CHARGED

Describe three examples of your positive attitude which your employer appreciated/appreciates

### 4) WHAT I LEARENED ABOUT THE CULTURE OF MY WORKPLACE

- The dress code is...
- The rules about the use of equipment (phone, photocopier, fax, etc.)
- The do's and don'ts about breaks and lunch times are...
- The three most common reasons for people getting fired from this job are...
- The clues to watch for which indicate that you have done something wrong are...
- Unacceptable reasons for absence and lateness are...
- I know that I have done well when...
- A star employee in this company could be described as...

### 5) THROUGH THE LOOKING GLASS

Choose **three** words which you think your co-workers or supervisor would use to describe you and why. The list is to give you some ideas, please feel free to add your own descriptors.

<ul><li>assertive</li></ul>	<ul><li>sincere</li></ul>	<ul><li>good humoured</li></ul>	<ul><li>independent</li></ul>	<ul><li>responsible</li></ul>
<ul><li>cheerful</li></ul>	<ul><li>honest</li></ul>	<ul><li>sociable</li></ul>	<ul><li>genuine</li></ul>	<ul><li>patient</li></ul>
<ul><li>reliable</li></ul>	<ul><li>creative</li></ul>	<ul><li>friendly</li></ul>	<ul><li>interesting</li></ul>	<ul><li>trustworthy</li></ul>
<ul><li>motivated</li></ul>	<ul><li>sensitive</li></ul>	<ul><li>outgoing</li></ul>	•eager	•loyal
<ul><li>helpful</li></ul>	∙skillful	<ul><li>steady</li></ul>	<ul><li>understanding</li></ul>	-

#### 6) THE NEXT STEP

Identify at least three ways in which you could improve as an employee

### 7) SUMMING UP

Describe the **most** important lesson/skill you learned from this experience and how it will help you in the future.

### **Final Assessment**

WEX Teacher:		Date:	
		WEX Teacher Signature:	
	a <b>suggested</b> gui	deline to be used to determine a student's final mark.	
Course Breakdown:		Student Percentages:	
Completed Hours	50%	Completed Hours%	
WEX Documentation	18%	WEX Documentation%	
Reflection Activity	10%	Reflection Activity%	
Employer Evaluation	11%	Employer Evaluation%	
Student Evaluation	6%	Student Evaluation%	
Resume	5%	Resume%	

### **Completed Hours:**

TOTAL

The student must complete a minimum of 100 hours on the work site. Completing extra hours is encouraged but not necessary.

TOTAL

100%

#### **Documentation:**

The student must submit ALL documentation present within the Work Experience Student Package, complete with all necessary signatures and in a timely fashion after the work experience is complete.

### **Reflection Activity:**

This activity must reflect on the student's entire experience, contain each aspect outlined above (p. 13) and showcase what the student has learned about themselves, their work environment, and their future pathways.

### **Employer Evaluation:**

To obtain a mark reflective of the employer's thoughts, one could total up the marks given for all twenty-two criteria. With a perfect score being eighty-eight, divide the student's total by eight, and you will have an accurate percentage

#### Student Evaluation:

To obtain a mark reflective of the student's thoughts, one could total up the marks given for all fifteen criteria. With a perfect score being sixty, divide the student's total by ten, and you will have an accurate percentage.

### Resume:

The student needs to submit an updated personal resume that includes their work experience hours.

%