



Greater
VICTORIA
School District

Career Education

556 Boleskine, Victoria, B.C. V8Z 1E8

Tel: (250) 475-4182 Fax: (250) 475-4115

WORK EXPERIENCE

Student Package

Revised: September 2017

**If you require further information, please call Lindsay Johnson, Career Programs
at 250-475-4182**

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)
- 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

Greater Victoria School District #61



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

WORK EXPERIENCE AGREEMENT FORM

STUDENT INFORMATION

Name: _____
 Address: _____
 _____ Postal Code: _____
 Home Phone #: _____
 Student Cell Phone #: _____
 Birth date: ____/____/____ Grade: ____ Sex: ____
 Parent/Guardian(s): _____
 Parent Cell Phone #: _____

SCHOOL INFORMATION

School: _____
 Address: _____
 Phone: _____
 Fax: _____
 Unpaid WEX Paid WEX
 Program: Career Prep ACE IT Other
 Program Teacher: _____

SUPERVISING EMPLOYER INFORMATION

Business Name: _____
 Address: _____
 Postal Code: _____ Phone: _____
 Cell: _____ Fax: _____
 Email: _____
 This worksite is covered by WCB
 Supervisor's Name: _____
 Supervisor's Position: _____

**FREEDOM of INFORMATION &
PROTECTION of PRIVACY ACT**

The information collected on this form is required and will be used solely for the purpose of administering the Work Experience Agreement. It will be kept secure and confidential, in accordance with the Freedom of Information and Protection of Privacy Act. Any questions concerning the collection and use of this information may be directed to your school Principal.

TRANSPORTATION

The parties agree that the parent/guardian(s) and the student are solely responsible for the student's transportation to and from the work site. If the School Board or Work Site Employer is providing transportation, describe and attach separately.

SIGNATURES

**All signatures are required
to validate the agreement.**

Supervisor: _____
 Union Rep (if applicable): _____
 Student: _____
 Parent/Guardian: _____
 Teacher: _____
 Principal: _____
 Date: _____

WORK PLACEMENT DETAILS

Dates: _____ 20____
 To: _____ 20____
 And/or: _____ 20____
 To: _____ 20____
 Work Hours: From _____ to _____
 Mon: Tues: Wed: Thurs: Fri: Sat: Sun:
 Duties: _____

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 the 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:

Student:

Supervisor:

WEX Teacher:

Student Focus Area (check one of the boxes)

Business and Applied Business (XA)

Fine Arts, Design and Media (XB)

Fitness and Recreation (XC)

Health and Human Services (XD)

Liberal Arts and Humanities (XE)

Science and Applied Science (XF)

Tourism, Hospitality and Foods (XG)

Trades and Technology (XH)

Dates/Hours to be worked by student:

DATES:

FROM _____, 20____ TO _____, 20____

WORK HOURS:

FROM _____ AM / PM TO _____ AM / PM

The following section needs to be completed by the company supervisor:

Please describe at least three different duties or tasks that the student will perform during their placement:

Please list at least five employability skills that the student should demonstrate during their placement (what you would look for in a good employee):

Please describe any skills the student will learn that are specific to this workplace/site:

Supervisor Signature:

Teacher Signature:

Date:

Student Signature:

Parent/Guardian Signature:

Date:

WORK SITE INSPECTION SHEET

Employer: _____ WorkSafeBC #: _____

Supervisor: _____ WEX Teacher: _____

Teacher Signature: _____ Date: _____

School Career Teacher Contact

In evaluation of the worksite, please bear in mind that the two most important considerations are:

1. the provision of a safe work environment
2. the interest and concern of the site supervisor for the student

PLEASE CHECK THE APPROPRIATE DESCRIPTION:

This is a standard worksite (where a worker performs the tasks and responsibilities related to a career under supervision of a worksite employer).

OR

This is a non-standard worksite (a location created by the school district for the purpose of providing work experience, a volunteer position, a post-secondary placement in which the student participates as a student, not an employee).

- This is a physically safe worksite (includes location, environmental conditions, building structure, etc.)
- Necessary safety practices are in place and the student will be informed of these.
- The employer has been informed of WorkSafe BC accident or injury reporting procedures and coverage.
- The employer/supervisor is familiar with and supports the objectives of the program.
- The employer/supervisor will ensure that the student is adequately instructed/trained and supervised.
- The employer/supervisor will ensure a comfortable working environment for the student including acceptance of the student as an integral part of the work team, freedom from harassment, reasonable expectations for work, breaks, lunch, etc.
- The employer/supervisor is willing to interview the student prior to the work experience (if applicable).
- The employer/supervisor is willing to assist in the evaluation of the student, to provide access to teachers on the worksite and to discuss the student's progress with the student and school staff.

Please list any reservations, concerns or limitations you have about this worksite.

Safety attire and/or equipment required:

This worksite is: Recommended Not recommended

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:

Student:

Supervisor:

Student Signature:

Supervisor Signature:

#	Task	YES	NO	N/A
1.	I was given an orientation regarding workplace safety and generic risks of this job.			
2.	Hazards and risks specific to this workplace were identified during this orientation (physical, chemical, biological etc.). They are: _____ _____ _____			
3.	I have reviewed the emergency procedures (fire, earthquake) with my employer. They are: _____ _____			
4.	I know the location of the fire extinguisher and fire alarm. Describe location: _____			
5.	I have been informed of who health and safety committee members are. They are: _____			
6.	I have been informed of the WHMIS procedures at my worksite. They are: _____ _____			
7.	I know where the incident report forms are stored. Describe the location _____			
8.	I have been informed that Personal Protective Equipment IS / IS NOT required. List: _____ _____			
9.	I have reviewed worksite policies on dealing with robberies and/or shoplifting. (if applicable).			
10.	I have requested that I will be trained on any machinery or equipment prior to use. Possibly: _____			

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:

Step 1:

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.

Completed by the Student and returned to the Work Experience Teacher

Student Time Log

Student: _____ Supervisor: _____

Student Signature: _____ Supervisor Signature: _____

WEX Teacher: _____ Teacher Signature: _____

Date	Location	Duties Performed	Hours
TOTAL HOURS:			

Greater Victoria School District #61

Employer Evaluation

Student: _____ Supervisor: _____

Dates of Work Experience: _____ Company/Employer
 _____ to _____

Student Signature: _____ Supervisor Signature: _____ Date: _____

Duties Performed:

Please evaluate this work experience student as you would a NOVICE WORKER and, if possible, DISCUSS THIS EVALUATION WITH THE STUDENT.

Please evaluate the student on the four point scale below:

4 – Outstanding 3 – Good 2 – Fair 1 – Needs Improvement N/A – Not Applicable

PERSONAL & SOCIAL QUALITIES					
❖ Cooperative: able to work with others	4	3	2	1	N/A
❖ Accepting of constructive criticism	4	3	2	1	N/A
❖ Adaptable to new tasks/situations	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 attitude to job	4	3	2	1	N/A
❖ Shows interest and enthusiasm	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 WORK HABITS					
❖ Reliable/Responsible	4	3	2	1	N/A
❖ Shows good work ethic	4	3	2	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	1	N/A

COMMUNICATION SKILLS					
❖ Speaks clearly	4	3	2	1	N/A
❖ Listens well	4	3	2	1	N/A
❖ Uses appropriate body language	4	3	2	1	N/A
❖ Writes clearly and legibly	4	3	2	1	N/A

FINAL ASSESSMENT					
❖ Overall work performance	4	3	2	1	N/A

Recommendations for improvement and additional comments (if possible, refer back to the Training Plan)

Greater Victoria School District #61
Student Self-Evaluation

Student: _____ Total Hours: _____

Dates of Work Experience: _____ Company/Employer: _____
 _____ to _____

Student Signature: _____ Date: _____

Job Description:

Rate yourself by circling the number which best describes your performance for each of the criteria:
4 – Outstanding 3 – Good 2 – Fair 1 – Needs Improvement N/A – Not Applicable

PERSONAL & SOCIAL APTITUDES					
❖ Cooperative Abilities (teamwork)	4	3	2	1	N/A
❖ Acceptance of constructive criticism	4	3	2	1	N/A
❖ 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 coworkers)	4	3	2	1	N/A
❖ Dependability and responsibility	4	3	2	1	N/A

WORK QUALITIES & HABITS					
❖ Effort (initiative, eagerness, effectiveness)	4	3	2	1	N/A
❖ Dexterity (speed, accuracy, organization)	4	3	2	1	N/A
❖ Follow through (completing tasks, projects)	4	3	2	1	N/A

COMMUNICATION SKILLS					
❖ 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

Describe any specific work skills learned during your placement:

Describe your overall work performance and any suggestions for improvement:

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 LEARNED 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.

- | | | | | |
|------------|------------|----------------|----------------|--------------|
| •assertive | •sincere | •good humoured | •independent | •responsible |
| •cheerful | •honest | •sociable | •genuine | •patient |
| •reliable | •creative | •friendly | •interesting | •trustworthy |
| •motivated | •sensitive | •outgoing | •eager | •loyal |
| •helpful | •skillful | •steady | •understanding | |

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.

Greater Victoria School District #61

Final Assessment

Student:

Date:

WEX Teacher:

WEX Teacher Signature:

This marking template is a **suggested** guideline 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	_____%
TOTAL	100%	TOTAL	_____%

Completed Hours:

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

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.