WCPSS School to Career Job Shadowing Guidelines



North Wake College and Career Academy

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Job Shadowing Overview

Job shadowing immerses students in the world of work, where they can get first-hand information about job skills and careers. By bringing students into the workplace to see professionals at work, very real and tangible options come alive for them. Job shadowing provides exciting reasons why students should apply themselves in school. It creates a critical link between education and success. Classroom exercises conducted prior to and following the job shadow experience are designed to help students connect their experiences to their course work and relate the visits directly to career pathways, related skill requirements, and postsecondary educational options.

Goals of the Job Shadowing Program:

- Demonstrates the connections between academics and careers and helps students learn by making their class work more relevant.
- Builds community partnerships between schools and businesses that enhance the educational experiences of all students.
- Introduces students to the requirements of professions and industries to help them prepare to join the workforce of the 21st century.
- Encourages an ongoing relationship between young people and caring adults.

The coordinator of the Job Shadow experience must

- · Properly prepare the student,
- Secure the appropriate, approved job shadow host or check with the chosen host to be certain the job shadow host offers the student what is expected,
- Make available to the student all forms required for this activity,
- Communicate with parent regarding the activity,
- · Comply with all requirements regarding the safety of the student,
- Follow up with the student and the host.

Job Shadowing Requirements and Checklist:

Job Shadowing in WCPSS varies from school to school and among programs within each school (eg. Career academy requirements, individual student job shadowing,WRAL-TV Job Shadow Day, etc.). Each Job Shadow experience should be approved as a field trip. It should not count as an absence for the student. Each job shadow coordinator may add forms and documents unique to the school and to the situation. However, the following list of forms and requirements must be documented.

Coordinator	<u>Student</u>	<u>Host</u>	ACTIVITY
			Pre-Job Shadow
			School Trip Request #1713c submitted by coordinator for approval (Aug.).
			Conference for coordinator and student(s) (career exploration, possible placements, forms, transportation, scheduling, expectations, questions to ask, behavior, dress code, etc.)
			Communication with host company and contact person (goals, expectations, date & schedule, contact information, evaluation)
			Forms given to student by coordinator; returned by student: # 1713a Parental Consent for School Trips Photo/Video Permission
			Transportation-related permission Permissions from teachers
			Work-Based Learning form submitted to Central Services
			Reminders sent to host and to student(s); to teachers.

<u>Coordinator</u>	<u>Student</u>	<u>Host</u>	<u>ACTIVITY</u>
			Day of Job Shadow
			Student arrives on time, appropriately dressed & ready to learn; host confirms
			Post-Job Shadow
			Coordinator follows up with student and host.
			Evaluations and reflections received from host and student(s).
			Thank you note written by student and mailed; by coordinator and mailed.

Parent Agreement specific to Job Shadowing

Student's full name (please print)	
Host company	telephone
Contact person	email
Location	
Parking/Drop-off instructions	
above. I will ensure that my child vexpectation that he/she will be cour demeanor during the job shadowing I understand that my child will prove	the Job Shadow experience referenced will be on time, and will reinforce the teous and professional in dress and g event. Tide transportation to and from the job mplete all documents for this event.
I,	hild will have his/her own transportation
Parent's signature	date

TO:	[Name of Job Shadow Coordinator]
FAX #:	[FAX #]
FROM:	
RE:	(Name of School) Job Shadow Day
Organizati	on:
Contact Pe	erson and Department:
	none #:
	mail:
Address:	
City and Z	ip:
# of stude	ents:
	8am – 2pm):
	e for student(s):
Lunch plar	ns: bring lunch bring \$ for lunch lunch is provided rcle one

Please fax this form back by [date]. Thank you!

If the student(s) will be driven to a different location at anytime during the job shadow day, the driver must complete level 4 volunteer clearance with WCPSS. This can be done from any WCPSS school.

Job Shadow Tips for Hosts

Here are some ideas to help make your day as a job shadow host a success:

Keys for Host Employees:

- Find out some information about your student visitors (grade level, interest, etc.)
- Emphasize the positive in your conversations but always be honest and straightforward most of all be yourself!
- Be patient it's hard to do your work, answer questions and be a good host at the same time!
- Only take as many students as you can handle.
- Have fun!

Ideas for structuring you day:

- 1. Start the day with an orientation and introductions
 - Tell students a little about yourself and ask them some questions as well.
 Talk about:
 - Your professional background
 - Describe your "typical" day and be prepared to field questions regarding salaries, promotions, schooling, etc.
 - > Talk about your career path and why you chose to pursue it.
 - > If possible, introduce your guest to co-workers and management.

Anything you can do to "break the ice" and make the student feel welcome and at ease with you and your colleagues – this way students are more likely to ask questions.

2. Give a tour

- Give the students a tour of your office or business and explain the roles of each person to which they are introduced.
- Try to interact with your co-workers on all levels to give the students a good overview of how your organization runs and the culture.
- Give an overview of what your organization does and how it affects the local community.

Have each student ask you at least one thing that they would like answered or would like to see during the visit.

3. Suggested activities

- Plan to allow the students to do some limited, hands-on tasks (under supervision) and try to invoke conversation that will let the student participate.
- Plan to review a small job with someone who reviews your work or whose work you supervise.
- Call a client either answer your phone calls while the students are at your desk or set aside a phone call you need to make.
- o Show off your computer programs and let the students drive.
- o Make a quick entry in the various software programs you use.
- Help student visitors learn as they observe. Don't assume that they know.
 Use language that the student can understand and try to avoid technical jargon.
- Stress the importance of promptness, attendance, appropriate personal appearance and attire and positive work ethic.
- Take the students to lunch invite a co-worker to lunch along with the students.

Finishing the students' visit by taking them to lunch is a great way to end the day on a positive note!

4. Some other ways to help you relate to students

- Explain how your work relates to classes they might be taking in school such as math, business, technology courses, etc.
- Share examples of your daily routine that incorporates skills they are learning such as communication, critical thinking, problem solving, teamwork, writing, etc.
- Tell students about yourself, where you went to school, some work and college experiences (internships, first jobs, etc.) and why you chose this field as your career.
- Explain the important aspects of your work and how they relate to other jobs within the organization.
- Explain what you like about your job as well as some of the disadvantages to your career field.

Keep in mind these are only suggested guidelines. Each job shadow experience is unique. Plan for a day that works for you and your organization.

SAMPLE JOB SHADOW INTERVIEW QUESTIONS

- 1. What is your occupation and job title?
- 2. What are your job duties and day-to-day activities?
- 3. What do you like best about your job?
- 4. What don't you like about your job?
- 5. How did you become interested in this type of work?
- 6. Why did you choose this career?
- 7. What kind of personal satisfaction do you get from your job?
- 8. What special training do you need for your job?
- 9. What kind of technical knowledge is required for this job?
- 10. How are technology demands increasing or changing?
- 11. What kind of experience was required for this job?
- 12. What personality traits are important for this job?
- 13. What are the normal work hours?
- 14. Are certain times of the month or year busier than others times?
- 15. Is there opportunity to work overtime?
- 16. How are you compensated for overtime work?
- 17. Are there special perks that come with this job?
- 18. What is the salary ranges for different levels in this field?
- 19. Do you have to depend on others in order to accomplish your job?
- 20. Do you take work home?
- 21. What is the level of job security in this occupation? Why?
- 22. What are the opportunities for advancement in this occupation?
- 23. What on-going education is required for this occupation?
- 24. To be hired for this occupation what is the best education/training?
- 25. Is it difficult to get admitted to an education/training program for this occupation?
- 26. How difficult is it to find employment when you have completed the basic education and training?
- 27. What is the long-term future of this occupation in terms of job availability?
- 28. What are the job opportunities for this area of work?
- 29. Does this business/organization do drug testing?
- 30. What part-time jobs, high school classes or extracurricular activities would best prepare you for this occupation or the education/training required for this occupation?
- 31. How do you use math, reading, writing, business, technology, science, and foreign language skills in their daily work?
- 32. What advice would you give a student interested in this career?

Name	date of Job Shadowing
Job Shadow Placement	Job Shadow Host's name
STUDENT REFLECTION ACTIVITY	
Now that you have completed your job shadowing eobserved today.	experience, take some time to reflect on what you have
1. What are the responsibilities and title of your wo	rkplace host?
2. Which parts of the job did you think were really i	interesting?
3. If you worked here, which parts of the job would	you find uninteresting? Why?
4. Would you consider a career in this field? Why or	r why not?
5. What surprised you the most about what you lea	rned, heard, or observed today?
6. Which knowledge and skills are you learning in s	chool that could be used on the job?
7. Which knowledge and skills do you need to stren	gthen for success on the job?
8. Did any other ideas for careers come to mind too	day?
9. How will this affect your plans for the future?	

WCPSS Job Shadow Host Verification Form

Thank you for welcoming	to shadow you today.
We appreciate your support of our student and the effort to help towards his/her career goals.	guide this student
Please comment about what the student and/you gained from th	is experience:
Signature of person being shadowed times of job shadowing	date
Please print your name and title:	
Your email address:	
Company or Organization:	
Mailing address	
Would you be willing to job shadow next year? Yes	No

PARENTAL CONSENT AND EMERGENCY INFORMATION FOR JOB SHADOWING/WBL EXPERIENCES

THIS CONSENT FORM IS TO BE SIGNED ONLY AFTER UNDERSTANDING AND AGREEING TO THE INFORMATION BELOW. IF THIS FORM IS NOT COMPLETED AND RETURNED PRIOR TO THE JOB SHADOWING/WBL EXPERIENCE, THE STUDENT WILL NOT BE PERMITTED TO PARTICIPATE AND WILL REMAIN AT SCHOOL.

Place of Work-Based Learning Experience			
·			
Purpose	JOB SHADOWING EXPE	RIENCE	
Name of Teacher/Sponsor	CDC's or CAC's Name	School	
Method of Transportation	Student will provide their ow	n transportation	

Changes/Cancellations

I understand job shadow/WBL experiences may be cancelled when necessary by the principal, superintendent, or board of education. The school system cannot guarantee reimbursement when such cancellations occur. Parents/guardians will be notified of any significant change in plans prior to the job shadow experience/WBL experience.

Expectations and Instructions

I understand the following is expected of the student.

- To follow instructions given by the teacher prior to the job shadow/WBL experience.
- Comply with all school and district policies and rules of conduct.

In the event any of the above expectations or instructions is violated, I understand school officials reserve the right to deny the student the job shadow/WBL experience and the student will be subject to school disciplinary consequences.

Insurance Coverage

I represent that the student has insurance either through the school system's student insurance program or through my own insurance carrier.

I REQUEST THAT THE BELOW-NAMED STUDENT BE ALLOWED TO PARTICIPATE IN THE JOB SHADOW/WBL EXPERIENCE PLANNED AND SPECIFICALLY CONSENT TO THE STUDENT'S PARTICIPATION.

Form 1713a Revised 10/03

Page 12 of 16

^{*}When privately-owned vehicles are used for transporting students, only the vehicle owner's liability coverage is applicable to any vehicular accident. When students are transported by vehicles owned by Wake County Public School System, the school system vehicle liability coverage is applicable to any vehicular accident.

Name of S	Student				
Parent/Gu	ardian Signature			Date	
Student Signature (Grades 6-12)				Date	
If the job sailing, cr	uise ship travel, etc.	ience includes water related or participation on amust press permission for the	sement park rides, I ack	nowledge the inher	
I AGREE	DO NO	T AGREE To	O THE ABOVE SPEC	AL CONDITIONS	
Parent/Gu	ardian Signature			Date	
County Pu school off emergency shadow/W	ablic School System ficials will use the co y medical procedure BL supervisor(s) ar	gency while my child is possible officials to release the fountact information provides or treatment are require ranging for and consenting medical procedures or treatments.	Illowing information to ed below to contact me d during the job shadov ng to the procedures or	the healthcare provi in the event of such v/WBL experience,	ider. I understand emergency. If any I consent to the job
Parent/Leg	gal Guardian Signati	ıre	Date		
Emergen Name:	cy Contact Infor	mation I st Choice		2 nd Choice	
Phone:					
1 110110.	(Day)	(Night)	(Day)	(Night)	
	(Mobile)		(Mobile)		
Emergen	cy Medical Infor	mation (Please compl	ete as applicable.)		
Family Ph	ysician:		Phone N	umber:	
Date of las	st tetanus booster:				
Medicatio	n taken routinely:				
Special he	ealth needs:				
The origi		given to the Career Dev company the student w			

Form 1713a Revised 10/03

WAKECOUNTYPUBLICSCHOOLSYSTEM

COMMUNICATIONS DIVISION TO: Parent/Guardian FROM: **SUBJECT: Photograph/videotaping permission DATE:** The Wake County Public School System uses photographs, slides, videos, or illustrations of students for many purposes. Such photographs, videos, or other illustrating materials may be used in newsletters or publications produced by the school system, in slide presentations, videos, and/or web sites about the schools, by the news media in school related news coverage, in video productions aired on television produced by the school system, or in other similar forms of communication. This form allows you as a parent or guardian to choose whether your child may be in a video, photograph, or other illustration used by the Wake County Public School System or the news media. **CHECK ONE:** I give permission to the Wake County Public School System or the news media to make photographs, slides, videos, or illustrations of my child. Further, I authorize their use without inspecting or approving the finished product or its specific use. No. I do not give permission for my child to be included in presentations by the Wake County Public School System or the news media. Student's name: Student's teacher and school: Parent/Guardian:_____ Date of signature: Street address, city, state, zip:

Please return this form by ______ to the school. Created July 1999

NOTICE TO VOLUNTEER DRIVERS SCHOOL TRIPS OR ATHLETIC EVENTS

DESTINATION/NATURE OF THE ACTIVITY
DATE(S) OF TRIP
NAME OF TEACHER/SUPERVISOR/COACH
SCHOOL
"A school trip is defined as a student or a group of students leaving a school campus under the sponsorship of the school and under supervision of school employee(s) to extend educational experiences consistent with the general goals and objectives of the total school program. A school trip must be related to the curriculum of the school or to a co-curricular activity (e.g., clubs, student council). Any trip made by school students which has not been approved by the board and school administration in accordance with Policy 5430 shall not be considered to be a school trip as herein defined." School Board Policy 5430.2
Athletic events include practices and /or games of the sports offered by the Wake County Public School System. These events are not included in the definition of school trips.
Transportation for School Trips and Athletic Events If student transportation is by a Wake County System owned vehicle, the school system vehicle liability coverage is applicable to any vehicular accident.
If student transportation is by a private vehicle, the vehicle owner's liability coverage is applicable to any vehicular accident.
Parent or adult drivers should be aware that they may be held responsible for injuries to any Individual's they are transporting and must certify that any private vehicle used is covered by at least the North Carolina State required insurance coverage.
I have read the above statements regarding accident insurance coverage on Wake County Public School System school trips or athletic events. I also understand that I, or the owner of the vehicle being driven by me on this trip, may be responsible for injuries that occur to the individuals being transported. In the event that I am using a privately owned vehicle for transportation on this trip, I certify that the vehicle is covered by insurance as required by North Carolina State Law. I further certify that I have a current operator's license that has not been suspended or revoked for any reason, which authorizes me to drive the vehicle being used in the state of North Carolina and that I have not been charged or convicted of any motor vehicle violations, other than minor traffic violations, within the past 5 years.
DRIVER'S SIGNATURE VEHICLE OWNER'S INSURANCE COMPANY POLICY NUMBER

C20

Additional forms:

- 1713c Field Trip Request form completed and submitted early in the fall to CDC's high school field trip committee
- If an adult who is not the parent drives, or if another student drives, you will need form 1713b "Notice to drivers on school trips . . . "
- In some cases, you may be required to submit a Safety Plan. Examples are available.
- If a student is uninsured, you will need to check the non-insured student guidelines through the Risk Management department of WCPSS.
- If a student is going to be alone with a host, away from others in the company or organization, that adult must apply and be cleared through a background check.
- If a student is going to ride to lunch or to a work site, the driver must complete form 1713b. If alone with the host, the host must be cleared in a background check.