

WESTERN AREA CAREER & TECHNOLOGY CENTER
Training Agreement for Cooperative Education

Student's Name: _____ Birth Date: _____ Age: _____
 Address: _____ City _____ State _____ Zip _____
 Student Phone: _____ Student Email: _____ Work Permit # _____
 Parents/Guardian _____ Parent Phone _____ Parent Email _____
 Student's Program of Study: _____
 CTC: **Western Area Career & Technology Center, 688 Western Ave., Canonsburg, PA 15317 Telephone: 724-746-2890**
 Training Agency: _____ Address: _____ City _____ ST _____ Zip _____
 Training Supervisor: _____ Title: _____
 Telephone: _____ Fax: _____ Email: _____
 Student Job Title: _____ Start Date _____ End Date: _____ Rate of Pay: \$ _____ p/h

EMPLOYER/TRAINING SITE RESPONSIBILITIES

1. The Employer/Training Site will adhere to all State & Federal regulations regarding employment Child Labor Laws, minimum wages & worker's compensation.
2. The Student-Learner will be given a variety of work assignments & be supervised by an experienced person.
3. A periodic evaluation of job progress will be made by the Training Supervisor on a rating form provided by the school.
4. The Training Supervisor will arrange a conference with the Cooperative Education Instructor when a trainee problem arises.
5. The Training Sponsor will provide necessary safety instruction throughout the Student-Learner's training period.
6. The Employer/Training Site will not employ a Student-Learner to displace a regular worker.
7. Exposure to hazardous work will be incidental to the Student-Learner's training & not a part of the training program.
8. The Employer is not liable to the Unemployment Compensation Fund for wages paid to the Student-Learner while in the training program. This provided in Section 4L4IOC in Pennsylvania Compensation Law.

STUDENT-LEARNER RESPONSIBILITIES

1. The Student-Learner will adhere to company policy. Employment may be terminated for the same reasons as for regular employees. The Student-Learner agrees to perform the assigned duties in a loyal manner & to work in the best interest of all concerned.
2. The Student-Learner agrees to report job problems to the Training Supervisor & the Cooperative Education Instructor.
3. The Student-Learner must be regular in attendance at their job. If unable to report to work, the Employer & the Cooperative Education Instructor will be notified before the start of the normal work day.
4. The Student-Learner must be regular in attendance at their home-school & WACTC on required days or if they are not scheduled to work. The Student-Learner will report to school for designated meetings & related instruction. If absent for *any & all reasons* from the home-school and/or WACTC the student agrees to contact the Cooperative Education Coordinator prior to 8 am.
The student will receive an incomplete grade if not present for the NOCTI test.
5. The Student-Learner's employment will be terminated upon withdrawal from school and/or removal from the Work Coop Program for noncompliance with the rules stated in this agreement & in the program's rules as well as behavior/attendance issues/poor grades at the home-school or WACTC.
6. The student understands that termination from their job & removal from the Work Coop Program may result in a failing grade for the quarter, which will be at the discretion of the Coordinator after consultation including the employer, WACTC administrator & program instructor.

SCHOOL RESPONSIBILITIES

1. The program is under the direct supervision of a certified Cooperative Education Instructor.
2. The Student-Learner will receive related instruction & safety instruction for the Occupational Instructor or the Cooperative Education Instructor prior to job placement.
3. The Cooperative Education Instructor will visit the Student-Learner & Training Supervisor on a regular basis at the Training Site.
4. The Cooperative Education Instructor will investigate compatibility of job circumstances with requirements for student attainment of advanced standing in an apprenticeship program upon graduation from high school.
5. The Student-Learner's insurance & attendance will be covered by the school policy.

This memorandum is for the purpose of outlining the agreement between the school & the Employer on the conditions of training to be given a student while on the job. We, the undersigned, agree to the conditions & statements in this Agreement.

_____	____/____/____	_____	____/____/____
Student-Learner	Date	Employer	Date
_____	____/____/____	_____	____/____/____
Parent or Guardian	Date	WACTC Instructor	Date
_____	____/____/____	_____	____/____/____
Home School Principal	Date	WACTC Principal	Date
_____	____/____/____	_____	____/____/____
Home-School Guidance Counselor	Date	WACTC Cooperative Education Consultant	Date