

Oxford Area High School – Workplace Experience Employer Contract

The **STUDENT** agrees to:

- Follow all conditions outlined in **Workplace Experience Student Contract**.
- Maintain satisfactory grades in all courses.
- Follow all school rules while in the workplace
- **Maintain permanent employment.**
- Complete necessary documentation.
- Inform the coordinator when changing employers.

STUDENT information:	PRINT LEGIBLY FIRST and LAST names:	
	Signature:	Date:
	Phone # and e-mail address:	
Job title:		Circle days to be employed: M T W Th F
Hours:		Must work during school days/hours!
Homeroom Teacher:		Paid Position:

The **PARENT** agrees to promote the value of the student's experience by cooperating with the teacher / administrator and the employer, and to encourage good work and study habits.

PARENT information:	PRINT LEGIBLY FIRST and LAST names:	
	Signature:	Date:
	Phone #(s) and e-mail address:	

The **JOB SUPERVISOR** agrees to:

- Provide the student with an opportunity to learn job skills
- Instruct the student regarding job responsibilities
- Address job-related concerns
- Maintain legal, safe, and appropriate work conditions for student employees
- Verify that the student is working during **SCHOOL** hours.
- Notify the parent **and school** immediately in case of accidents, illness, or other serious problems
- Not discriminate in employment, educational programs, or activities on the basis of race, color, sex, national origin, or handicap

EMPLOYER: SUPERVISOR and BUSINESS information:	PRINT CLEARLY & LEGIBLY FIRST and LAST names:	
	Signature:	Date:
	Name of Business:	
	Phone #(s)	Email Address
	Address:	
	City, State, Zip:	

Due: August 15, 2022

Administrator Approval:

Date:

School Contact: Mr. Jamie Canaday jcanaday@oxfordasd.org
Phone 610-932-6640 fax 610-932-6649