

# Employer Packet

## *Career Engagement Opportunities (CEO) Program*



**2020-2021**

This packet includes:

- \*Business Information Form
- \*Training Agreement
- \*Employer Evaluation
- \*Student Weekly Log

# CEO Program

## BUSINESS INFORMATION FORM

Name of Business/Organization: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Contact Person and Title: \_\_\_\_\_

Email: \_\_\_\_\_

Primary Supervisor of the Student Intern and Title: \_\_\_\_\_

Primary Supervisor Phone: \_\_\_\_\_ Email: \_\_\_\_\_

The Supervisor is responsible for the following:

- Day-to-day management of interns
- Work oversight, direction and feedback
- Training, motivating and developing the student intern
- Evaluating intern performance

**Please answer the following questions:**

1. Will the student intern need certain training or knowledge prior to the start of the internship? If so, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Will the student intern need to be 18 years old?  Yes  No  
*\*All students will have parent/legal guardian consent to participate in the internship program.*

3. Will the student intern require a background check (BCI check)?  Yes  No

4. Will the student need a Drug Screen?  Yes  No  
*If yes, will you the business/organization cover the costs?*  Yes  No

5. How many student intern positions will your organization have available at this time? \_\_\_\_\_

*Please describe each internship position available.*

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Additional information for the participating business:

- Internship/work experience will vary in length and students will earn high school credit.
- Student internship work times can be flexible, however work times should be discussed and agreed upon between the student, the business and the school.
- The business, school, and student will sign the Training Agreement.
- The Internship Coordinator will communicate regularly during the internship to monitor the progress of the experience.
- Program and performance evaluations will be completed at the end of the internship and the student will present a final project as a part of the internship.

**Any comments or questions?**

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# CEO Program

## *Career Engagement Opportunity*

### Training Site Agreement Form

**As the Training Site Provider,** \_\_\_\_\_  
**I agree to the following:**

1. Provide student with structured on-site exposure to work, the development of good work habits, and basic work skills.
2. Discuss with the student the expectations each of you has for the internship experience.
3. Present training in a practical sequence and include instruction and experience in work processes relevant to the occupation as performed by the Training Provider.
4. Make certain that the student is not receiving conflicting instructions from different supervisors.
5. Provide and furnish, at your own expense, all instructions, materials, equipment, supplies, and services necessary for the training and experience of the student.
6. Provide training that covers safety and work-site regulations.
7. Provide student with relevant safety instructions and equipment necessary for reasonable protection against injury and harm. Accidents involving a student shall be reported to the school immediately.
8. Advise the student of all customary practices of the Training Provider and normal requirements of the job, including personnel practices and policies.
9. Ensure that students are accepted and assigned jobs in accordance with the Child Labor Laws and treated equally regardless of race, color, national origin, gender or disability.
10. Prohibit the assignment of students to positions involving political activities.
11. Assist the student in keeping accurate time sheets for the student's hours of training and sign the hour verification sheet, checking the time log for accuracy.
12. Provide ongoing dialogue with the student regarding his/her performance. Positive feedback is always appreciated and negative feedback should be offered in the form of specific suggestions for improvement.
13. Have regular contact with the CEO Program Coordinator to provide feedback on the student's performance and abilities (weekly communication by email or phone call).
14. Contact the CEO Program Coordinator should you have any questions or concerns.

**Termination of Agreement**

The Training Site Provider or School may cancel this agreement at any time through the mutual agreement by both parties. Students will be aware that termination is a possibility at the training site.

This agreement shall be in effect from \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ to \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

The above Training Site agrees to accept the following student as an Intern:

Intern Name: \_\_\_\_\_

Age: \_\_\_\_\_ Telephone: \_\_\_\_\_

High School: \_\_\_\_\_

The Intern's **proposed** daily schedule will be: (time sheet shall be utilized)

Monday \_\_\_\_\_:\_\_\_\_\_ to \_\_\_\_\_:\_\_\_\_\_

Tuesday \_\_\_\_\_:\_\_\_\_\_ to \_\_\_\_\_:\_\_\_\_\_

Wednesday \_\_\_\_\_:\_\_\_\_\_ to \_\_\_\_\_:\_\_\_\_\_

Thursday \_\_\_\_\_:\_\_\_\_\_ to \_\_\_\_\_:\_\_\_\_\_

Friday \_\_\_\_\_:\_\_\_\_\_ to \_\_\_\_\_:\_\_\_\_\_

Saturday \_\_\_\_\_:\_\_\_\_\_ to \_\_\_\_\_:\_\_\_\_\_

Sunday \_\_\_\_\_:\_\_\_\_\_ to \_\_\_\_\_:\_\_\_\_\_ Total number of hours per week: \_\_\_\_\_

\*Supervisor will monitor & sign the time sheet. CEO Coordinator will receive a copy.

Supervisor Signature: \_\_\_\_\_

Student Signature: \_\_\_\_\_

School Signature: \_\_\_\_\_

CEO Program Signature: \_\_\_\_\_

# CEO Program

## *Career Engagement Opportunity*

### EMPLOYER EVALUATION OF THE INTERN

**Student Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**The Employer Evaluation of the student intern is based on a five point scale; selecting 1 is POOR and 5 is EXCELLENT.**

Foundation Skills	Characteristic	Scale of 1 to 5 (please circle)				
ATTENDANCE Days Missed _____	Understanding work expectations for attendance and adhering to them. Notifying supervisor in advance in case of absence.	1	2	3	4	5
PUNCTUALITY Days Late _____	Understanding work expectations for punctuality. Arriving on time for work, taking and returning from breaks on time, and calling supervisor prior to being late.	1	2	3	4	5
WORKPLACE APPEARANCE	Dressing appropriately for position and duties. Practicing personal hygiene appropriate for position and duties.	1	2	3	4	5
TAKING INITIATIVE	Participating fully in task or project from initiation to completion. Initiating interaction with supervisor for next task upon completion of previous one.	1	2	3	4	5
QUALITY OF WORK	Giving best effort, evaluating own work, and utilizing feedback to improve work performance. Striving to meet quality standards.	1	2	3	4	5
COMMUNICATION SKILLS	Speaking clearly and communicating effectively – verbally and non-verbally. Listening attentively. Using language appropriate for the work environment.	1	2	3	4	5
RESPONSE TO SUPERVISION	Accepting direction, feedback, and constructive criticism with positive attitude and using information to improve work performance.	1	2	3	4	5
TEAMWORK	Relating positively with co-workers. Working productively with individuals and teams. Respecting diversity in race, gender and culture.	1	2	3	4	5

WORKPLACE CULTURE, POLICY, AND SAFETY	Demonstrating understanding of workplace culture and policy. Complying with health and safety rules. Exhibiting integrity and honesty.	1	2	3	4	5
SPECIFIC WORKPLACE AND CAREER SKILLS	Exercising sound reasoning and analytical thinking. Using knowledge and information from job to solve workplace problems.	1	2	3	4	5

**Overall Performance Rating:** \_\_\_\_\_  
(Scale 1 to 5: 1 is poor and 5 is excellent)

**Overall Performance Summary:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Would you hire this individual?**  Yes  No

If yes, why? \_\_\_\_\_  
\_\_\_\_\_

If no, why? \_\_\_\_\_  
\_\_\_\_\_

**Would you recommend this individual to another employer?**  Yes  No

If yes, why? \_\_\_\_\_  
\_\_\_\_\_

If no, why? \_\_\_\_\_  
\_\_\_\_\_

**Suggestions to improve the student's experience:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# CEO Program INTERNSHIP WEEKLY LOG

Student Name \_\_\_\_\_

Internship Location \_\_\_\_\_

Week of \_\_\_\_\_

DATE	HOURS	ACITIVITIES	EQUIPMENT / MATERIALS USED	INTERESTING EVENT / SPECIAL PROJECT

**Please explain at least one thing that you have learned, either about the position or yourself, from this experience.**

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**Student Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**Supervisor Signature** \_\_\_\_\_

**Date** \_\_\_\_\_