Work-Based Learning Verification Form

(Please fill out a new form for each experience. If it is a multi-day experience and the days are consecutive, only one form is necessary.

Date and Time of experience:					
Name of supervisor, leader, coordinator of experience:					
Describe the Work-Based Learning experience in detail:					
Describe how this event has helped prepare you for your future career or the world of work.					
Required Signatures					
In accordance with Ottawa Area Intermediate School District, any absence that is not medical or work based learning with proof of absence will be marked unexcused. Any questions, please contact the Student Services Office. By completing this form, both the student and parent/guardian agree to complete all required documentation for participation in a Work Based					
Learning Experience. When all requirements have been successfully met, the attendance code for all eligible events will be changed, and the eligible absences will not be reflected on the student's transcript.					
1) Complete this required verification form and turn into the Student Services Office within two days of completing experience. 2) Complete all reflection work (In Naviance or other required means) within one week of receiving.					
3) Complete all required classroom assignments/work that may have been missed during the event. For non-school sponsored Work Based Learning opportunities transportation and safety responsibilities are at the discretion of the parent/student while away from school during the					
school day. All parties agree that the school can not be held liable for anything that occurs during a non-school sponsored experience. In addition, any supplies, uniforms, personal protection equipment, etc. necessary for the experience are to be provided by the student.					
All federal (https://webapps.dol.gov/elaws/whd/flsa/cl/v18.asp) and	state				
	iments/WAGE-HOUR/WHD-99xx-Information-Sheets/WHD-9934-YESA-restrict-Grid/whd-9934-Youth-Employment-Ha h=161A2500F14996463E913D7735B0ED12) youth labor laws must be followed.				
Parent Name:	Parent Signature:				
Student Name:	Student Signature:				
School Personnel Name:	School Personnel Signature:				
Experience Personnel Name:	Experience Personnel Signature:				