# WORK-BASED LEARNING (WBL)

# TRAINING PLAN

### The WBL training plan documents the necessary components of a successful WBL experience. The plan should focus on the student’s background, personal objectives, as well as skills to be acquired and enhanced.

# referral INFORMATION

## Enter information about the participating student and the person referring the student along with contact person

|  |  |  |
| --- | --- | --- |
| Student |  | Person submitting request |
| Name: |  | Name: |
| Age:  |  | Contact Phone: |
| Grade Level:  |  | Contact Email: |
| School: |  | **CONTACT PERSON** |
| Contact Email:  |  | Name:Phone:Email: |
| Type of WBL Experience |
| [ ]  CO-OP  | [ ]  CEIP  | [ ]  WECEP  | [ ]  GEWEP |
| [ ]  Paid | [ ]  Unpaid  | [x]  Unregistered  |  |
| Work Description |
| Work Based Learning Requested:**The request is subject to change pending scheduling adjustments**[ ] Monday [ ] Tuesday [ ] Wednesday [ ] Thursday [ ] Friday |
| [ ] AM [ ] PM |
|  |
| Adult Support: [ ] 1:1 District Provided TA [ ]  Job Coach [ ]  Interpreter |

# STUDENT BACKGROUND

## Enter information about the participating student’s background which will assist employer(s)/mentor(s) in planning experiences, providing support, and offering feedback.

|  |
| --- |
| Student interests |
| Describe any related interests concurrent with the WBL experience. |
|  |
| Courses Completed |
| List CTE courses or industry certification completed prior to the WBL experience. |
|  |
| Career Goal |
| Briefly describe the current long-term career goal(s) of the student. |
|  |
| Skills and Talents |
| List the student’s specific skills and/or talents, such as technology applications or language skills. |
|  |
| Accommodations |
| List any disability under section 504 of the U.S. Rehabilitation Act, an Individualized Education Plan (IEP), or English Language Learner (ELL) status which can be shared with the public and might require accommodation and should be noted to the employer/mentor. |

# employability skills and goals

## employability skills describe WHAT the student is expected to learn. WBL expectations can be drawn from appropriate standards and resources. These will be used for evaluation of the WBL experience.

|  |  |  |
| --- | --- | --- |
| WORK-RELATED SkillsEmployability Skills: Check the TARGETED skills |  | Specific goalsPlease list any other goals or experiences to be gained:  |
|  |
| [ ]  Demonstrates responsibility on the job  |  |  |
| [ ]  Works independently when necessary  |  |
| [ ]  Accept constructive criticism |  |
| [ ]  Dependable in attendance |  |
| [ ]  Language acceptable for the worksite  |  |
| [ ]  On the job safety |  |
| [ ]  Flexible and adapts well to change |  |
| [ ]  Works well with others |  |
| [ ]  Uses time effectively |  |
| [ ]  Appropriately dressed |  |
| [ ]  Positive attitude |  |
|  |  |

|  |
| --- |
| **We understand the expectations of the WBL experience and the evaluation form below that will be used to measure student performance.**  |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Home District Special Ed Director/CSE Chairperson Signature Date**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Referrer Signature Date**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Student Signature Date**