



**Eugene School District 4J  
Internal Career Related Learning Experiences  
Agreement**

Job Shadow  Internship  Work Experience  Apprenticeship  Service Learning

Student Name (print) \_\_\_\_\_

School and Department \_\_\_\_\_

The following agreement needs to be read carefully by the student, Parent/Guardian and the Supervising 4J Staff Member. Information needs to be filled out completely and signed by each party of the Agreement. Each may want to keep a copy for their files. Return the Agreement to the Career Related Learning Experiences Coordinator right away.

The Student Agrees to:

- Be on time and attend regularly.
- Notify the Supervising 4J Staff Member or Teacher in case of absence, lateness or illness, in advance.
- Exercise honesty, courtesy, have a cooperative attitude. Respect District & school rules.
- Dress appropriately for the District facility culture.
- Not terminate the placement or increase the agreed on hours without discussing it with the Career Related Learning Experiences Coordinator and Supervising Staff Member first.
- Notify the Career Related Learning Experiences Coordinator and Teacher of any problems, issues or questions.
- Be responsible for having this Agreement filled out, signed and turned in at appropriate times.
- If 18 years of age, read and sign the Parent/Guardian part of this Agreement.

The Supervising 4J Staff Member and/or Teacher and/or Supervising Volunteer agrees to:

- Provide a positive and safe learning environment and experience.
- Be available to the student for questions, assistance, guidance, etc.
- Clearly define expectations and responsibilities.
- Provide other learning opportunities (observations, meetings, etc.) when possible.
- Notify the Career Related Learning Experiences Coordinator or Teacher of any issues or problems with the student.
- Notify the Career Related Learning Experiences Coordinator if the student is no longer participating in the placement or if there is a request to increase hours.
- Complete a final evaluation on the student.
- If the supervising adult is a volunteer: Complete a Confidential Information form and agree to the statement that he or she has informed the District of any convictions other than a minor traffic violation. (The District will consider this information and the results of the Confidential Information form when making a placement decision.)

The Parent/Guardian Agrees to:

- Support the student in the placement and the responsibilities of it.
- Give permission for the student to participate fully.
- Accept responsibility for any negligent actions on the part of the student.
- Indemnify and hold harmless the sponsoring 4J school, Eugene School District 4J, it's officers, agents, and employees from any and all claims, loss, actions, liability or costs including attorney's fees and other costs of defense brought by the student and arising out of or in any way related to this placement.
- Authorize any emergency medical care and/or procedures deemed necessary.
- Assume all related medical and/or emergency costs.

All Parties Understand and Agree the Student Will Be:

- Covered by Eugene District 4J Workers' Compensation Insurance (except during mentorship experiences) for injuries incurred during the scope of this placement, but that time-loss payments are not applicable and the student is not entitled to time-loss payments.
- Covered by Eugene District 4J general liability insurance during the scope of this placement for unintentional bodily injury or property damage to a third party.

**Parents, Please Provide the Following Information:**

Transportation Type to Be Used \_\_\_\_\_

Student Covered by Auto Insurance       yes       no

Name of Auto Insurance Company \_\_\_\_\_

Auto Insurance Company Address \_\_\_\_\_

Policy Number \_\_\_\_\_

Agent Name \_\_\_\_\_ Phone \_\_\_\_\_

Student Covered by Medical Insurance       yes       no

Name of Medical Insurance Company \_\_\_\_\_

Medical Insurance Company Address \_\_\_\_\_

Policy Number \_\_\_\_\_

Agent Name \_\_\_\_\_ Phone \_\_\_\_\_

\_\_\_\_\_  
Student Name (print)

\_\_\_\_\_  
Student Signature and Date

\_\_\_\_\_  
Parent/guardian Name (print)

\_\_\_\_\_  
Parent/guardian Signature and Date

\_\_\_\_\_  
Site Supervisor Name and Phone (print)

\_\_\_\_\_  
Site Supervisor Signature and Date

*"District 4J prohibits discrimination in all its programs and activities for students on the basis of disability, race, color, gender, national origin, ethnicity, sexual orientation, age, religion, marital status, socioeconomic status, cultural background, familial status, physical characteristics, or linguistic characteristics of a national origin group. District 4J is an equal opportunity/affirmative action employer committed to workforce diversity and compliance with the Americans with Disabilities Act."*

\_\_\_\_\_  
Career Related Learning Experiences Coordinator (print name)

\_\_\_\_\_  
Phone