

Name: _____

STUDENTS PLEASE READ Groundhog Job Shadow Month Guidelines

The State of Georgia has implemented a standard for all students to complete a minimum of 8 hours with a mentor in the career field that they have chosen to research for the Capstone and WBL Initiatives. Work Based Learning students will gain those mentoring hours while job shadowing a professional in the field that they have indicated on their Individual Graduation Plan. Students may arrange for any day in February to shadow someone that will allow them to meet the date that the accompanying assignment is due: February 28th. Please read the guidelines below. You will be excused from school and **gain all 8 hours with a professional in your area of interest.**

Finding a mentor: Due January 31st

1. Your placement must be relative to the career indicated on your Individual Graduation Plan or obtain permission from Ms. Boyer
2. You may not job shadow with a close family member (dad, mom, sibling)
3. You may not shadow a teacher at Cartersville High School. You may shadow someone at a different high school
4. **You may not shadow someone that another student is shadowing**
5. You must stay at the business for a minimum of the hours you would be in school (8 hours)
6. Your mentor will have to agree to host you at their place of work by signing this form BEFORE your name is submitted for absence approval. This will be considered a *field trip day* for attendance purposes.

Shadowing Day: Any day in February allowing time for you type the essay

1. You must bring printed samples from your portfolio materials with you
2. You must have your interview questions with you and be ready to take note of the answers
3. You must have the mentor evaluation sheet and the mentor sign off sheet available for your mentor to complete

After your mentor experience: Due February 28

1. You will be responsible for typing a reflection piece documenting the time with your mentor.
 - a. This will be an essay discussing your reflection of your mentor's answers in the interview as well as any observations of the day, your thoughts on the working conditions, and whether you would be interested in pursuing this type of job in your future.
 - b. Assignment and formatting details are detailed on a separate sheet
 - c. **DUE BY: February 28, 2020**

Failure to turn in the reflection piece will result in an unexcused absence.

Name: _____

Parental Permission

I give my child (first, last) _____ permission to participate in the job shadowing experience at (list business) _____. I acknowledge that my child will have to stay at the business for the length of time he/she would be in school (8 Hours). I also agree to provide my child with transportation to and from the place of business listed if needed. I understand that I assume all liability as to the safety and welfare of my child while they are participating in the job shadow day.

Parent's Signature

Date

Print Parent First and Last Name: _____ Contact number: _____

Failure to turn in the reflection piece will result in an unexcused absence.

For the Company/Shadow Participant/Employee: MENTOR

Objective of Job Shadowing: To allow students the opportunity to spend a "day in the life of" with a professional in their career field of interest to enhance their portfolio of career related experiences. Additionally, the student should gain professional feedback of the work they have completed for their capstone portfolio and special insights into the industry that they are concentrating their research.

Mentors, thank you in advance for taking the time to mentor our Cartersville High School student. In our efforts to prepare students for college and career planning, we have instituted a capstone project in conjunction with the Work Based Learning (WBL) program participants that is centered on a career field of interest for all seniors and additional juniors in WBL. Part of their experience is documenting time spent with a career mentor. Our expectation is that the student will spend a minimum of 8 contact hours with you by allowing them to shadow you at your workplace. If you agree to mentor a CHS student, we are asking the following of you:

1. Allow the student to shadow you in every aspect of your job that day (Meetings, lunch, unexpected tasks, etc.)
2. Set aside time for the student to speak with you and interview you for a reflective piece in their portfolio
3. Set aside time to evaluate a couple of student selected portfolio assignments they have completed provide written feedback (form provided) of these items
4. Be willing to share "your story" with the student

In order for their absence to be approved, please sign this form AND **attach a business card to the form**. If you do not have a personal business card, please email Ms. Shannon Boyer, WBL Coordinator at sboyer@cartersvilleschools.org with the following information to verify the shadow opportunity. **Name of business; Mentor Name; Mentor Phone; Student first and Last name**

Name of Business _____

Address of Business _____

Your name: _____

Best contact phone number: _____

Professional Signature: _____

Are there any safety concerns at the business? Please List:

Please list the REQUIRED or SUGGESTED DRESS CODE for the student while they are with you:

Deadline to return the COMPLETED Permission form is January 31st, 2020