



Work-Based Learning (WBL) Plan and Agreement

DUE MAY 1

Student Information

Student Name:

Last

First

M.I.

Date of Birth:

Address:

Street Address

City, State

Zip

Phone Number:

Email:

Program Area Information

CTE Program Area: ☐ Automotive Technology ☐ Agriculture Education ☐ Business/Marketing
☐ Construction ☐ FACS ☐ Health Science ☐ Welding

Credit Hours: ☐ ½ (75 hours) ☐ 1 (150 hours)

Career Cluster:

<input type="checkbox"/> Agriculture, Food, and Natural Resources	<input type="checkbox"/> Human Services
<input type="checkbox"/> Architecture and Construction	<input type="checkbox"/> Information Technology
<input type="checkbox"/> Arts, Audio-Video Technology, and Communication	<input type="checkbox"/> Law, Public Safety, Corrections, and Security
<input type="checkbox"/> Business Management and Administration	<input type="checkbox"/> Manufacturing
<input type="checkbox"/> Education and Training	<input type="checkbox"/> Marketing
<input type="checkbox"/> Finance	<input type="checkbox"/> Science, Technology, Engineering, and Math
<input type="checkbox"/> Government and Public Administration	<input type="checkbox"/> Transportation, Distribution, and Logistics
<input type="checkbox"/> Health Science	
<input type="checkbox"/> Hospitality and Tourism	

Company/Business Information

Company/Business Name:

Company/Business Address:

Street Address

City, State

Zip

Work-site Mentor Name and Title:

Copy of Federal Background Check Provided (Work-site Mentor)*: ☐ Yes ☐ No

Work-site Mentor Phone Number:

Work-site Mentor E-mail:

Student Work Schedule (Days and Hours):

Total Hours Per Week:

Rate of Pay (if applicable):

The employer agrees to:

- take an active part in the training and supervision of the student while providing instruction in accordance with the WBL Plan and Agreement
- provide safety training as required by OSHA
- assist the teacher/coordinator in the evaluation of the student's performance on the job by completing the necessary evaluation forms, when required
- provide close supervision by an experienced and qualified person to avoid subjecting the student to unnecessary or unusual hazards
- give the same consideration to the student as given to other employees in regard to safety, health, general employment conditions and other regulations of the business
- comply with all regulations prohibiting discrimination on the basis of race, color, national origin, sex, disabilities, religion, marital status or age
- comply with all laws regarding wages and hours of minors and student learners
- contact the teacher/coordinator prior to the student's dismissal from employment
- pay the student/trainee when an employer/employee agreement is negotiated
- maintain confidentiality of student information in accordance with state and federal law

The student agrees to:

- be courteous and considerate of the employer, co-workers, and others
- keep the employer's best interest in mind and to be punctual, dependable and loyal
- notify the employer and the coordinator as soon as possible if they are not able to attend work and/or school
- keep such records of work experiences and wages (if applicable) earned as required by the school and submit them on or before specified deadlines
- conform to the policies, procedures and regulations of the employer and the school
- maintain a satisfactory performance level while on the job
- abide by the WBL Plan and Agreement developed by the teacher, coordinator, and employer

The parent/guardian agrees to:

- accept responsibility for the student's safety and conduct while traveling to and from school, place of employment and/or home
- support the concepts of WBL
- abide by the WBL Plan and Agreement for hazardous occupations, when applicable

The school/coordinator agrees to:

- revise the WBL Plan and Agreement as needed to improve the student's work experience
- visit the student on the job as often as appropriate to determine instructional needs and to ensure that the student receives job training and supervision, as well as a variety of job experiences
- maintain confidentiality related to the information gathered from the company/business
- adequately train and prepare the student for success, prior to the WBL placement

Signatures	Date
Employer:	
Student:	
Parent/Guardian:	
School Administrator:	
Molly Zahradka, Career Pathways Coordinator at North Valley:	

*Background check not required; however, parent/guardian will be informed. Parent/Guardian signature serves as approval.

2025 North Valley Summer Internship Program

North Valley Extended School Project

21st Century Community Learning Centers

Parent Release of Records and Information Consent Form



Dear Parents and Guardians,

You are receiving this consent form because your child enrolled in the North Valley 2025 Summer Internship Program, an activity of the North Valley Extended School Project, a 21st Century Community Learning Center after school program. To enroll your child in this program, the North Valley Extended School Project must provide information about your student to the Youth Services online registration system maintained by City Span, which will in turn be shared with the North Dakota Department of Public Instruction. The North Dakota Department of Public Instruction will also provide performance-related information to the Youth Services system and be accessible to the Program provider named above. I understand that: To offer after school to my child, North Valley Extended School Project will pursue registering my student in a 21st Century Community Learning Center. Youth Services and the North Dakota Department of Public Instruction will maintain the confidentiality of my student's personally identifiable information in accordance with law. To register your student in this program, the following student data must be shared: First and last name, birth date, State Student ID, student demographics like ethnicity, special education, and English learner status, grades and school attendance, and performance-related information like state assessment scores.

I CONSENT to the North Valley Extended School Project/Grafton Site disclosing my child's personal information listed above to Youth Services and the North Dakota Department of Public Instruction for the purposes stated above. All documents which include information contained in or derived from a student's education records and personally identifiable information are deemed confidential pursuant to FERPA and therefore will not be disclosed to any third party.

Signature of Parent/Legal Guardian

Parent/Guardian Full Name (please print)

Date

My Child's Full Name (please print)

Please return by May 1.

A signed copy can be given to Molly Zahradka or sent to molly.zahradka@northvalleyctc.org.