

- Apprenticeship
- Co-op
- Internship

**APPLICATION TO GWINNETT'S WORK-BASED  
LEARNING PROGRAMS**

Date \_\_\_\_\_ Student Name \_\_\_\_\_ Student I. D. # \_\_\_\_\_

Address: \_\_\_\_\_

School Attending \_\_\_\_\_ Date of Birth \_\_\_\_\_ Current Grade \_\_\_\_\_ Graduation Year \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_ Home Number \_\_\_\_\_

Parent's/Student's e-mail \_\_\_\_\_ Parent's cell # \_\_\_\_\_ Student's Cell # \_\_\_\_\_

Have you decided upon a career? \_\_\_ Yes \_\_\_ No If so, what? \_\_\_\_\_

Current Place of Employment \_\_\_\_\_

Current Supervisor's Name \_\_\_\_\_ Phone Number \_\_\_\_\_ Ext. \_\_\_\_\_

Is your current job in a career field you wish to pursue? \_\_\_ Yes \_\_\_ No Do you plan to keep this job? \_\_\_ Yes \_\_\_ No

If no, what type of job placements are you interested in? Your job must be program related and must be approved by the coordinator.

1<sup>st</sup> choice: \_\_\_\_\_

2<sup>nd</sup> choice: \_\_\_\_\_

List any previous work experience:

Company Name	Dates Worked	Primary Duties

Do you currently have a valid driver's license? \_\_\_ Yes \_\_\_ No; if not, how do you plan to get to work? \_\_\_\_\_

Outline your plans for post-secondary education or training (where do you plan to go to college and what will be your major concentration of study?) \_\_\_\_\_

List any courses or training you have completed which will aid in evaluating your qualifications for a **Gwinnett County Public School's Work-Based Learning Program**. For example, if you are pursuing a career in the medical field, which science courses have you taken? If you are pursuing a career in a business field, which business courses have you taken? To be considered for apprenticeship, you must have 2 semesters (.10 credit hours) of related coursework. \_\_\_\_\_

Attach 3 recommendations from either a teacher, a counselor or a school administrator to this application. Recommendation forms are included in your application packet. **Also, attach to your application a paragraph stating why you want to be in a work-based learning program if you are applying for apprenticeship.**



**I understand**

- that enrollment in a Gwinnett County Public School’s work-based learning program is limited and that making application for enrollment does not mean that I will automatically be accepted;
- that an interview with a work-based learning coordinator will be a part of the application process to determine a match between my career goals and my current and previous academic classes;
- that once accepted, I must complete all required forms one of which includes acceptance of my responsibilities under the program guidelines;
- that my grades, discipline record, and attendance record may be checked by the coordinator prior to acceptance into the program.
- If, after the semester begins and the student has to finalize his/her schedule and the student still has not become employed, he or she will be required to request a schedule change and will be enrolled in regular classes with a regular class schedule. (Check with your teacher to find out what your school’s grace period is for schedule changes).
- Students may be required by their employer to work holidays, weekends and/or Spring Break.
- If a period of unemployment occurs within or at the end of a semester, the student will be placed under coordinator or administrator supervision for the work release periods and may not leave campus without permission of the coordinator or administrator.
- In the event the student loses his/her driver’s license, other transportation will be the responsibility of the student and/or family. Continuation of work is necessary to complete the required number of hours for credit. Students who complete the required hours for the course prior to the end of the semester, will not be allowed to leave their job, because work credit is based on continuous employment until the end of the school term.
- Student’s must leave campus when regular classroom instruction is complete each day

Confidentiality in all jobs is a must. Your employer takes confidentiality very seriously and may require you to sign a confidentiality agreement. Prior to taking photographs or using any forms, reports, etc. as samples for your portfolio, you must obtain permission in advance from your employer. **Any breach of confidentiality required by your employer or any other offense that results in your termination will, in turn, result in the loss of your work-based learning credit.**

**Please refer to the Parent/Guardian Consent form for other requirements of the work-based learning program.**

This student will be required to work a minimum of \_\_\_\_\_ hours in this program.

By signing below, the student and Parent/Guardian acknowledge understanding of the above and agree that this student is permitted to apply to Gwinnett’s work-based learning program. If the student is accepted, he/she will abide by all requirements of the program.

Student Signature \_\_\_\_\_

Date \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

\_\_\_\_\_ *Approved*  
 \_\_\_\_\_ *Hold*  
 \_\_\_\_\_ *Recommend another program:* \_\_\_\_\_



Work-Based Learning, Gwinnett  
2008-09

It is the policy of the Gwinnett County School System not to discriminate on the basis of race, color, sex, religion, national origin, age, or disability in any employment practice, educational program, or any other program, activity or service. If you wish to request an accommodation or modification or to make a complaint due to discrimination in any program, activity or service, contact:

The Office of Internal Resolution  
437 Old Peachtree Road, NW  
Suwanee, Georgia 30024