

# Morris County School of Technology



## Structured Learning Experience Agreement

## **Structured Learning Goals**

The student will be able to:

1. Describe the structure and function of the structured learning site.
2. Interact with a variety of personnel from the structured learning site.
3. Understand the educational and experiential requirements for specific jobs within the structured learning site.
4. Become knowledgeable regarding current practices and job opportunities within the occupation.
5. Acquire key technological skills as related to the field of interest.
6. Complete basic assignments or projects within the company.
7. Work collaboratively with co-workers, mentor, teachers, and Structured Learning Coordinator.
8. Meet with mentor on a regular basis to discuss the current project.
9. Review and update the Professional Development Plan and implement suggestions from mentors, teachers, and Structured Learning Coordinator.
10. Apply skills in the completion of mentor assigned projects.
11. Complete a minimum of 160 hours of on-site structured learning.
12. Attend quarterly Professional Seminar sessions scheduled by the Structured Learning Coordinator.
13. Complete time sheets as required and turn in weekly employer evaluations.
14. Complete Reflective Logs as required.

# GENERAL GUIDELINES FOR STUDENTS & PARENTS

## Structured Learning Experience Agreement

The purpose of the structured learning experience program is to provide students with educational experiences that will help them acquire marketable skills and develop positive work attitudes toward their career goals. The parents, school and students must share the responsibility for successful completion of this progress.

1. It is the responsibility of the student to seek a site with the help of the Structured Learning Coordinator. The coordinator must give approval to each site.
2. Students who wish to terminate their services with a company are expected to give two weeks notification under normal circumstances.
3. The following Agreement, which outlines the joint responsibilities of the employer and the student, must be signed by the student, the parent / guardian, employer / mentor, teacher and the Structured Learning Coordinator.
4. The mentor / employer, at the end of each week, must complete a rating sheet that evaluates the progress of the student at the site. In addition, an evaluation by the Structured Learning Coordinator will be made on the basis of routine observations of the students at the site.
5. Students are expected to attend school and to report for work as scheduled.
5. If the student fails to fulfill the conditions of this Agreement, graduation from MCST may be placed in jeopardy.

---

Student Signature

---

Date

---

Parent / Guardian Signature

---

Date

**MORRIS COUNTY VOCATIONAL SCHOOL DISTRICT  
STRUCTURED LEARNING EXPERIENCE**

**PART I: STUDENT INFORMATION**

Student Name: \_\_\_\_\_ Academy: \_\_\_\_\_

Address: \_\_\_\_\_ SS#: \_\_\_\_\_

\_\_\_\_\_ Age: \_\_\_\_\_

Home Tel.: \_\_\_\_\_ DOB: \_\_\_\_\_

Student Cell # \_\_\_\_\_ Email: \_\_\_\_\_

**Emergency Contact:** Name: \_\_\_\_\_ Tel. No.: \_\_\_\_\_

Relationship: \_\_\_\_\_

---

Company: \_\_\_\_\_ Tel. No.: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Fax No.: \_\_\_\_\_

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

\_\_\_\_\_

Mentor: \_\_\_\_\_ Position: \_\_\_\_\_

Student's Title: \_\_\_\_\_ Start Date: \_\_\_\_\_

Anticipated hours per week: \_\_\_\_\_ No. of weeks: \_\_\_\_\_

---

## **PART 2: STUDENT RESPONSIBILITIES**

I agree to follow the conditions of the structured learning experience listed below:

1. I will maintain regular attendance both in school and at the structured learning experience work site, complete and file weekly time sheets, and notify the Structured Learning Coordinator and workplace mentor if I am unable to report to the workplace.
2. I will demonstrate honesty, punctuality, courtesy, a cooperative attitude, proper health, good grooming habits, appropriate dress and a willingness to learn.
3. I will talk to school personnel and workplace mentor about any difficulties arising during my structured learning experience.
4. I will obey the rules and regulations of the company and comply with the employer's business practices and procedures.
5. I will furnish the Structured Learning Coordinator with all necessary information, complete all reports and keep a daily record of time and educational / training activities. If school credit is to be awarded, I understand that I will receive credit only if assignments, time sheets, and evaluations are satisfactorily completed.
6. I will work to acquire the knowledge and skills as outlined in my Professional Development Plan.
7. I will provide transportation to and from the worksite where applicable.
8. I understand and will respect the confidentiality of the information I am exposed to in the workplace during my structured learning experience.

SIGNATURE OF STUDENT \_\_\_\_\_ DATE: \_\_\_\_\_

## **PART 3: PARENT/GUARDIAN RESPONSIBILITIES**

I agree to the following conditions of the structured learning experience:

1. I will encourage my child or ward to effectively carry out the responsibilities as outlined in the Professional Development Plan.
2. I will assist my child or ward to keep on schedule and to develop an understanding of the necessity of developing good work habits.
3. I will report any concerns raised by my child or ward regarding the structured learning experience to the Structured Learning Coordinator.
4. It is agreed that parents, and not the school district, are solely responsible for providing transportation to and from the worksite. I hold the school district harmless in the event of an accident.

I understand that this structured learning experience is not employment and that my child or ward may not be entitled to wages or a promise of employment at the completion of the structured learning experience as per NJ Department of Labor; Child Labor Laws, Subchapter 18, 12:56-18.2 School to Work Program.

I hereby give my consent for my child to participate in the structured learning activities during the current school year.

PARENT / GUARDIAN SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**PART 4: BUSINESS / AGENCY RESPONSIBILITIES**

Company Name: \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ E mail \_\_\_\_\_  
Contact Person \_\_\_\_\_ Phone # \_\_\_\_\_

1. Student information will be kept confidential and no information will be released without parental and school district consent.
2. There is collaboration and planning between the business / agency and school staff resulting in clearly defined learning objectives related to the structured learning experience.
2. All student work activities shall adhere to applicable State and Federal Child Labor Laws and other regulations of the Federal and State Departments of Education and Labor.
3. Business / Agency will provide appropriate student supervision through appropriate employees.
5. Business / Agency will submit scheduled reports on student's progress completed by work site mentor.

EMPLOYER SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_  
PRINT NAME \_\_\_\_\_ DATE \_\_\_\_\_

SIGNATURE OF MENTOR \_\_\_\_\_ DATE \_\_\_\_\_  
PRINT NAME \_\_\_\_\_

---

**PART 5: SCHOOL ADMINISTRATION**

Name: Athena Borzeka Title: Director of Student Personnel Services  
District: Morris County School of Technology District Code: 3365  
Address: 400 East Main Street [borzeka@mcvts.org](mailto:borzeka@mcvts.org)  
Denville, NJ 07834 Telephone No.: 973 627 4600 x229

Structured Learning Coordinator:  
David Keidel Email: [keideld@mcvts.org](mailto:keideld@mcvts.org)  
Telephone No.: 973 627 4600, ext. 242

---

**PART 6: SCHOOL ADMINISTRATION RESPONSIBILITIES**

1. As a Structured Learning Program, the school will provide liability insurance coverage since a structured learning experience is an extension of the classroom.
2. All structured learning experiences shall adhere to applicable State and Federal Child Labor Laws and other regulations of the Federal and State Departments of Education and Labor.
3. The school district will provide regularly scheduled site visitations by district employees holding appropriate certification.
4. The school district will maintain student's records reflecting the structured learning experience.

SIGNATURE \_\_\_\_\_ TITLE Director of Student Services  
PRINT NAME Athena Borzeka DATE \_\_\_\_\_

**PART 7: SCHOOL – SITE STRUCTURED LEARNING COORDINATOR**

I agree to do the following:

1. I will conduct regular site visitations to evaluate student progress.
2. I will communicate regularly with the workplace mentor regarding the student's progress.
3. I will recommend the granting of credit after the successful completion of the structured learning experience.
4. I will ensure that specific academic, workforce skills and occupationally specific skills are specified in the Structured Learning Agreement and that progress is evaluated and recorded in the student's permanent record.

SIGNATURE: \_\_\_\_\_ TITLE: Structured Learning Coordinator  
PRINT NAME: David E. Keidel DATE: \_\_\_\_\_