



Coast Mountains Board of Education School District 82  
3211 Kenney Street, Terrace, BC V8G 3E9 (250) 638-4480 1-800-665-6134 Fax (250) 638-4406

## **WORK EXPERIENCE PROGRAM**

### ***STUDENT PACKAGE***

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3. Work Experience Consent Form
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## WORK EXPERIENCE PROGRAM OUTLINE

### Background

The fact that you can earn graduation credits for work experience shows the importance of experiential learning and the importance of extending education beyond the classroom into the community. Work experience and volunteer/community service support students in both their career development and their human and social development. This type of experiential learning increases the relevance of school by helping students connect what they learn in the classroom with the skills, knowledge and attitudes needed to be successful in both the workplace and larger community. The development of work ethic in all aspects is a major goal of work experience credits.

### Requirements

- Students must have successfully completed the Work Site Safety Awareness Package.
- Current resume and cover letter
- Reference from either a classroom teacher, counsellor, administrator or a work sponsor
- Completed application form

### Student Responsibilities during Placement

- Appropriate clothing and safety gear must be worn.
- Positive attitude towards work
- Full adherence to employer's cell phone policy
- Effective interpersonal skills
- Establish a schedule, maintain it and do not be tardy.
- Accumulate at least 100 hours of experience (no credit for less than 90 hours).
- Workplace Confidentiality (Don't share information about the business or its customers!)
- Honesty and Accuracy
- Review the Supervisor Assessment Sheet to gain a perspective of evaluation.
- Remember that you represent the business, your school and yourself.
- Remember to report any concerns about safety to your supervisor as soon as possible.
- Develop awareness around being productive, efficient, and busy. This will require asking for tasks that can be done at times when your supervisor is unavailable and can't direct you immediately. These may include tidying or cleaning the workspace if appropriate. Try to think about which tasks your supervisor needs to have accomplished.



### WORK EXPERIENCE CONSENT FORM (Parent/Guardian)

Student Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Student Cell #: \_\_\_\_\_

I give my consent for my son/daughter who is 14 years old/er to participate in the Work Experience component of Career Preparation as arranged by the school. S/he will be responsible for transportation and attendance involved in this education experience. S/he will also visit the worksite in advance of work experience for an interview and to have a Work Education Agreement form signed by the employer.

I understand that work experience is a provincially recognized course, and that to receive full Grade 12 credit for this course, my son/daughter must successfully complete a minimum of 90 hours in the workplace. I am also aware that, when placed on a standard worksite, there is protection for my son/daughter under the Workers Compensation Act.

In addition, I understand that a formal Work Experience Agreement will be presented to me for my signature prior to the commencement of the work placement.

***I hereby grant permission to School District 82 staff to:***

- Take photographs or video footage of my son/daughter while on work experience. These pictures may be used in Career Program publications, newsletters, calendars and on the website at any time for purposes of program promotion and celebration of student successes.*
- Obtain information and/or records from other appropriate agencies.*
- Release information and/or records to other appropriate agencies.*
- Discuss pertinent information with representatives from appropriate agencies on a strictly confidential basis.*

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

\_\_\_\_\_  
*Date*

**Optional Information:**

Parent/Guardian Email: \_\_\_\_\_

Student Email: \_\_\_\_\_

**For Emergency Use Only:**

Family Doctor: \_\_\_\_\_

Phone: \_\_\_\_\_

Parent work phone: \_\_\_\_\_

Emergency #: \_\_\_\_\_



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## Work Experience Agreement Form

### ***Between Coast Mountains Board of Education School District 82 and....***

Name of School: Northwest Trades and Employment Training Centre		
Supervisor Contact: Doug Brewer		
Address: 3120 Highway 16 East Terrace B.C.		Postal Code: V8G 4N8
Telephone: 250-635-7944	Fax:	Email: dougbrewer@cmsd.bc.ca.

### ***Student:***

Name:	Birthdate:
Address:	Postal Code:
Parent/Guardian:	PEN:
Address (if different from student):	
Telephone:	

### ***Work Site Employer:***

Employer Business Name:	
Supervisor Contact:	
Address:	Postal Code:
Phone:	Fax:
Email:	WCB#:

*By their **signatures**, the parties signify their agreement to the terms and conditions set out above.*

<b>School Administrator</b>	Signature:	Date:
<b>Career Counsellor</b>	Signature:	Date:

<b>Student</b>	Signature:	Date:
<b>Parent/Guardian</b>	Signature:	Date:

<b>Employer</b>	Signature:	Date:
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The parties agree to a work experience placement (the "work experience placement") for the Student with the Work Site Employer on the following terms and conditions:

#### **1. TERMS OF AGREEMENT**

This agreement will be in effect from October 2019 until June 2020, unless it is ended at an earlier time.

#### **2. STUDENT DUTIES**

The Student agrees to perform without payment those duties assigned to the Student from time to time by the Work Site Employer in consultation with the Board's representatives. The Student agrees to comply with the Work Site Employer's rules and all applicable safety regulations. Special Rules and regulations are to be communicated by the Work Site Employer to the student.

#### **3. DAYS/HOURS OF WORK EXPERIENCE PLACEMENT**

The student agrees to perform those duties as assigned by the Work Site Employer in accordance with paragraph 2 on the days and during the hours indicated:

Day(s) \_\_\_\_\_

Hours: \_\_\_\_\_

or, at such times, in writing, as may be agreed by the Work Site Employer, Board of Education and Student.

If the student is employed by the Work Site Employer beyond the days and hours agreed upon by the Work Site Employer, Board of Education and Student, none of the provision of this Agreement apply.

#### **4. SUPERVISION**

The Student agrees to be under the direct supervision of the Work Site Employer, and the Work Site Employer agrees to supervise the Student at all times during the work experience placement.

#### **5. SITE SAFETY ORIENTATION**

The Work Site Employer will provide to the Student site and work-specific safety training and will not permit the Student to perform any duties unless the Student has all safety equipment required for the tasks to be performed by the Student.

#### **6. BOARD ACCESS**

The Work Site Employer agrees to allow Board of Education representatives to have access at any time to the Work Site Employer's work site and the Student.

#### **7. TRANSPORTATION**

The parties agree that the parent(s) or guardian(s) and the Student are solely responsible for the Student's transportation to and from the Work Site Employer's work site, except \_\_\_\_\_.(If no exception, complete by writing "not applicable". If a Board of Education or Work Site Employer, transportation will be provided, describe in detail).

#### **8. EVALUATION**

When requested by the Board, the Work Site Employer will evaluate the Student's performance of the Student's duties, report that evaluation in the form required by the Board, and consult with Board representatives about the evaluation.

**9. WORKER'S COMPENSATION ACT INJURY COVERAGE** Students in a work experience placement at a standard work site are covered by the Workers' Compensation Act and are considered to be

workers of the Government of the Province of BC for Workers Compensation purposes only. Coverage is limited by the terms and conditions set out in the Minutes of the Workers' Compensation Board dated January 29, 2008.

#### **10. NOTICE OF INJURY**

The Work Site Employer will, if a Student is injured, immediately report the occurrence of injury to the Board by contacting:

Name, position, title: Geoff McKay Telephone, Fax: 250-635-7944

#### **11. INDEMNITY**

The Board agrees to indemnify and hold harmless the Work Site Employer, its employees and agents from any and all claims, demands, actions and costs whatsoever that may arise out of the negligent acts or omissions of the Board, the Board's employees and the Student, in their performance of this agreement, unless such negligent acts or omissions are at the direction of or occasioned by the Work Site Employer, its employees or agents.

The Work Site Employer agrees that it will not require the Student to perform any task unless such tasks might reasonably be expected to be within the scope of the Student's training and abilities.

#### **12. INSURANCE**

The Board shall maintain liability coverage to protect the Board, the Board's employees, and the Student during their performance of this agreement.

The Board will not be responsible for any loss or damage to the Work Site Employer's property unless such loss or damage is due to the willful acts or omissions of the Student or is caused by the Student acting outside the Student's authorized duties.

#### **13. MINIMUM AGE**

The parent(s) or guardian(s) of the Student warrant that the Student is \_\_\_ years of age or older at the date of this Agreement. (\*A student must be at least 14 years of age to participate in a work experience placement.)

#### **14. EFFECT ON EMPLOYERS**

The Work Site Employer agrees that the placement of the Student will not affect the job security of any employee of the Work Site Employer and will not affect the Work Site Employer's hiring practices. The placement of the Student will be in addition to the Work Site Employer's full complement of employees. The Student will not be a replacement for any employee.

#### **15. TERMINATION OF THE AGREEMENT**

Any party to this Agreement may end it at any time by giving notice in writing to all other parties at the addresses given in this Agreement.

#### **16. REFERENCE**

In this Agreement a reference to the Board includes the Board officers, employees or representatives acting within the scope of their employment.

#### **17. CONFIDENTIALITY**

All parties agree to maintain in the strictest confidence information that comes to their knowledge during the work experience.



**WORK EXPERIENCE PROGRAM  
 TRAINING PLAN**

Student:	Teacher/Monitor:
Work Site Business Name and Address: <hr/> <hr/> <hr/>	
Work Site Phone:	Work Site E-mail:
Work Site Contact Name:	

<b>On-Site Safety Orientation Date:</b>
<b>Days/Hours to be worked:</b>

List Duties and Tasks to be completed:	To Observe	Perform with help	Perform alone
1. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>List Employability Skills:</b>

**By their signatures**, the parties signify to agree with the above training plan:

Employer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

School Contact Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK EXPERIENCE PROGRAM

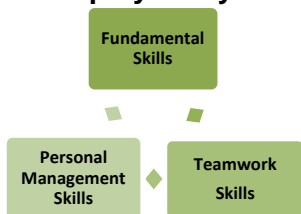
### Student Self Evaluation

Name: \_\_\_\_\_ Date: \_\_\_\_\_

School: \_\_\_\_\_

The Conference Board of Canada published this list of employability skills that has been widely recognized as identifying the most important attributes for personal success—whether you work for yourself or for someone else.

#### Employability Skills



Here is a shortened version you can use to assess your own strengths and weaknesses. This exercise can help you to identify your own personal traits: where you can be confident and where you can pay more attention.

**Student Self-Assessment:** Start by scoring yourself on each skill.  
 Be honest – it is the best way to grow!

#### FUNDAMENTAL SKILLS

	EXPECTATIONS ARE			
	4 Exceeded	3 Fully met	2 Just met	1 Not met
<b>Communicate</b>				
Read and understand information presented in a variety of ways (e.g., words, graphs, charts)				
Write and speak so that others pay attention and understand				
Listen and ask questions to understand and appreciate the points of view of others				
<b>Manage Information</b>				
Locate, gather and organize information using various technologies				
Analyze and apply knowledge from various sources				
<b>Use Numbers</b>				
Decide what needs to be measured or calculated				
Make estimates and verify calculations				
<b>Think and Solve Problems</b>				
Access situations and identify problems				
Seek different points of view and evaluate them based on facts				
Identify the root cause of a problem				
Readily use science, technology, and mathematics as ways to think				

## PERSONAL MANAGEMENT SKILLS

	4	3	2	1
<b>Demonstrate Positive Attitudes and Behaviours</b>				
Feel good about yourself and be confident				
Deal with people and situations with honesty, integrity, and personal ethics				
Take care of your personal health				

<b>Be Responsible</b>				
Set goals				
Plan and manage time money and other resources to achieve goals				
Assess, weigh and manage risk				
Be socially responsible and contribute to your community				

<b>Be Adaptable</b>				
Work either independently or as part of a team				
Be open and respond constructively to change				
Learn from your mistakes and accept feedback				
Cope with uncertainty				

<b>Learn Continuously</b>				
Be willing to continuously learn and grow				
Assess personal strengths and areas for development (like this exercise!)				

## Teamwork Skills

<b>Work with Others</b>				
Understand and work within the dynamics of a group				
Recognize and respect people's diversity and individual differences				
Manage and resolve conflict when appropriate				

<b>Participate in Projects &amp; Tasks</b>				
Select and use appropriate tools and technology for the task or project				
Continuously monitor the success of a project or task and identify ways to improve				

Having gone over this entire list of skills thoughtfully **and identified how you are currently performing them**, put your thoughts together and answer the three following questions:

1. What are your areas of <b>strength</b> and what did you enjoy the most?
2. In which <b>skills</b> do you feel you are growing – areas where you are currently improving?
3. What area <b>challenges</b> you the most? What skills are you going to improve?





# WORK EXPERIENCE PROGRAM Safety Awareness Package

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_

## Student Reference & Worksite Safety Package

	<u>pages</u>
➤ Online Work Safety Resources	2
➤ Work Site Safety – 8 Questions to ask your sponsor	3
➤ Tips to stay safe at work	4
➤ 6 Points on Worker Responsibilities	5
➤ WorkSafe BC - Rights and Responsibilities Program	6/7
➤ WorkSafe BC - The Right to Refuse Unsafe Work (Reg. 3.12)	8
➤ Youth Train in Trades Worksite Safety Checklist (to be completed at worksite & returned to Career Counsellor)	9/10

I certify that I have reviewed and completed the attached *Safety Awareness Package* and *Worksite Safety Checklist*.

Signature: \_\_\_\_\_

**NOTE:** Pg. 1 and *Worksite Safety Checklist* (pg. 9-10) to be kept in student file!



### **Online Work Safety Resources**

1. **WorkSafe BC:**

For worksite safety in British Columbia this is the best resource. WorkSafe BC has created a wealth of resources for the young worker. There are videos, interactive programs and outline brochures available on this site. Students can search topics by user group or industry.

<http://www2.worksafebc.com/topics/youngworker/home.asp>

2. **Canadian Center for Occupational Health and Safety:**

A federally funded website with resources for young workers in Canada. The website provides relevant information for young workers, teachers, employers and parents.

<http://www.ccohs.ca/youngworkers/>



**8 Questions to ask your sponsor**

1. What site-specific safety orientation and training will I receive before I start working?
2. Are there any hazards (such as noise or chemicals) that I should know about, and what are the appropriate steps to take to avoid these hazards?
3. Is there any safety gear that I am expected to wear, and who is responsible for providing the gear?
4. Will I be trained in emergency procedures for things like fire or chemical spills?
5. Where are the fire extinguishers, first aid kits, and other emergency equipment located?
6. Who do I talk to if I have a workplace health or safety question or if I feel that a job is unsafe for me to do (because of inexperience or conditions)?
7. What is the procedure if I am injured on the work site?
8. Who is the first aid attendant? How do I contact the attendant?



**Tips to stay safe at work**

Workplace injuries are preventable. Here are a few tips to help you stay safe at work.

***Remember: If you are asked to do a task that you think is unsafe – you have the right to say NO and refuse to do the work.***

1. Get some training and learn how to identify hazards, manage risks and do the job safely before you start.
2. Ask your supervisor to watch and check that you are doing the job the right way.
3. Speak up and let supervisors know if you think a task is too dangerous or difficult for you.
4. Ask questions and check with supervisors and co-workers when you aren't sure or can't remember how to do a job safely.
5. Learn what to do and where to get help in an emergency.
6. Always follow the safety rules and procedures.
7. Always wear any personal protective equipment provided by your employer.
8. Report all injuries (minor or major), OHS incidents and near-misses.
9. Look out for and report hazards.
10. Keep an eye on your co-workers, especially if they are new to the workplace and don't know all the OHS issues.
11. Try to get a good night's rest before heading into work. Feeling tired can lead to dangerous mistakes.
12. If you have a safety concern, talk with more experienced workers such as supervisors, co-workers and your family members to get advice.



**6 Points on Worker Responsibilities**

1. Know and follow health and safety requirements affecting your job.
2. If you don't know how to do something safely, ask for training before you begin working.
3. Work safely and encourage others to do the same.
4. Correct any unsafe conditions or immediately report them to your supervisor.
5. Immediately report any injury to a first aid attendant or supervisor.
6. Take the initiative. Make suggestions to improve health and safety.

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Taken from *Worksafe BC Brochure: Safety on the Job is Everyone's Business*



### **Student WorkSafe - Workplace Rights and Responsibilities**

Workers have the right to

- Information, instruction, and training about safe work procedures and how to recognize hazards on the job.
- Supervision to make sure they work without undue risk.
- Equipment and safety gear required to do the job safely (workers are responsible for providing their own clothing to protect themselves against the natural elements, general purpose work gloves, safety footwear, and safety headgear).
- Refuse to perform tasks and work in conditions they think are unsafe, without being fired or disciplined for refusing.
- Participate in workplace health and safety committees and activities.

As a worker, you are responsible for working without undue risk to yourself or others. To keep safe on the job:

- Don't assume you can do something you've never done before. Ask your supervisor to show you how to do it safely before you begin work. Ask your employer for safety training.
- Use all safety gear and protective clothing when and where required.
- Always follow safe work procedures and encourage your co-workers to do the same.
- Immediately correct unsafe conditions or report them right away to your supervisor.
- Know how to handle any hazardous materials or chemicals you use on the job.
- If you have any doubts about your safety, talk to your supervisor.
- Tell your supervisor of any physical or mental conditions that may make you unable to work safely.

### **Employers' Health and Safety Responsibilities**

One of the most important responsibilities of the employer is to ensure that workers are adequately trained in safe work procedures and properly supervised when carrying out their duties. Under the Workers Compensation Act, the employer has the legal responsibility to ensure that every worker receives adequate training. The employer must also follow up to see that the supervisor is carrying out all required training.

Employers are responsible for ensuring that all workers can do their jobs without unnecessary risk. Young and new workers in particular are often inexperienced and unable to recognize hazards. Many won't ask questions about workplace safety for fear of looking incompetent or simply because they don't know what to ask. The procedures employers have in place for workplace health and safety should take account of these and other facts about young and new workers.



## Employers should

- Know and comply with workplace health and safety regulations that apply to their workplaces.
- Create a workplace culture that encourages young and new workers to ask questions about any health and safety concerns they may have.
- Involve supervisors and experienced workers in identifying potential health and safety problems and developing prevention programs to eliminate these hazards.
- Give supervisors and young and/or new workers all the training they need to do their jobs and to recognize hazards.
- Provide the required safety gear and protective clothing. (Workers are responsible for providing their own clothing to protect them against the natural elements, general purpose work gloves, safety footwear, and safety headgear.)
- Evaluate equipment that young workers might be required to operate to ensure that it is safe for their use. Make sure workers know how to use any equipment safely.
- Make sure that young workers are appropriately supervised to prevent injuries and exposure to hazardous materials.
- Create an environment where “safe” behaviour is rewarded and recognized in the workplace.
- Provide supervisors with knowledge of how to train new and young workers. Check back with supervisors frequently to ensure they are following up with new staff answering questions and observing if the work is being done safely.

Specific requirements for new and young workers state that employers should provide orientation and training that includes

- The name and contact information for the young or new worker’s supervisor.
- The employer’s and young or new worker’s rights and responsibilities under the Workers Compensation Act.
- Workplace health and safety rules.
- Specific hazards to which the young and new worker may be exposed, including risks from robbery, assault, or confrontation.
- Procedures for working alone or in isolation.
- How to deal with violence in the workplace.
- Personal protective equipment (PPE).
- Location of first aid facilities.
- Emergency procedures, including how to access first aid and to report injuries.
- Instruction and demonstration of the young or new worker’s work tasks.
- The employer’s health and safety program, where applicable.
- WHMIS information requirements, where applicable.
- Contact information for the occupational health and safety committee or the worker health and safety representative, where applicable, to the workplace.



## **Refusing Unsafe Work**

According to the Occupational Health and Safety Regulation

1. A person must not carry out or cause to be carried out any work process or operate or cause to be operated any tool, appliance or equipment if that person has reasonable cause to believe that to do so would create an undue hazard to the health and safety of any person.
2. A worker who refuses to carry out a work process or operate a tool, appliance or equipment pursuant to subsection (1) must immediately report the circumstances of the unsafe condition to his or her supervisor or employer.
3. A supervisor or employer receiving a report made under subsection (2) must immediately investigate the matter and
  - Ensure that any unsafe condition is remedied without delay, or
  - If in his or her opinion the report is not valid, must so inform the person who made the report.
4. If the procedure under the Regulation does not resolve the matter and the worker continues to refuse to carry out the work process or operate the tool, appliance or equipment, the supervisor or employer must investigate the matter in the presence of the worker who made the report and in the presence of:
  - A worker member of the occupational health and safety committee or
  - A worker who is selected by a trade union representing the worker, or
  - If there is no occupational health and safety committee and if the worker is not represented by a trade union, any other reasonably available worker selected by the worker.
5. If the investigation under the Regulation does not resolve the matter and the worker continues to refuse to carry out the work process or operate the tool, appliance or equipment, both the supervisor or the employer and the worker must immediately notify an officer, who must investigate the matter without undue delay and issue whatever orders are deemed necessary.

**You have the right to refuse work** if you

- (a) have reasonable cause and
- (b) follow all procedures in the Regulation.

If you refuse to do work you consider unsafe, you should consider the following steps

1. You must discuss the situation with your supervisor or employer.
2. If the matter is not resolved, then a worker representative must be involved.
3. If the matter is still unresolved, a WorkSafeBC field officer is called in by both worker and management representatives.
4. While the matter is being resolved, you will be temporarily reassigned to another job.

If you feel you must refuse work, be sure to follow the procedures in the Regulation and any other policies that the employer may have. **Don't just stop work and go home!** If you don't follow the procedures, you may be subject to disciplinary action by your employer.





# WORK EXPERIENCE PROGRAM Worksite Safety Checklist

Employee Name: \_\_\_\_\_

Position (tasks): \_\_\_\_\_

Date hired: \_\_\_\_\_ Date of orientation: \_\_\_\_\_

Person providing orientation (name & position): \_\_\_\_\_

Company name: \_\_\_\_\_

#	Task	Initials (Supervisor or Employer )	Initials (Worker)
1.	I was given an orientation regarding workplace safety and general risks of this job.		
2.	Hazards and risks specific to this workplace were identified during this orientation (physical, chemical, biological etc.). They are: _____		
3.	I have reviewed the emergency procedures (fire, earthquake) with my employer. The muster station is: _____		
4.	I know the location of the fire extinguisher and fire alarm. Describe location: _____		
5.	I am working with a skilled worker abiding by safe-work practices.		
6.	I have been informed of the WHIMIS procedures at my worksite.		
7.	I know where the incident report forms are stored. Describe the location: _____ _____		



8.	I have been informed that Personal Protective Equipment (PPE) IS/IS NOT required: List PPE: _____		
9.	I have reviewed worksite policies on dealing with robberies and/or shoplifting, if applicable.		
10.	I have requested that I will be trained on any machinery or equipment prior to use.		
11.	I have been taught proper techniques for working from heights, if applicable.		
12.	I am aware of any potential safety issues, such as air quality, noise levels, tripping hazards, etc. They are: _____		
13.	I have discussed the WorkSafeBC accident or injury procedure with my supervisor. The site WorkSafeBC # is: _____		
14.	I know who I should report workplace hazards/injuries to. Their names are: _____		
15.	I know where the First Aid Station is located. Describe location: _____		
16.	I have been informed of who the health and safety committee members are. They are _____		

I \_\_\_\_\_ (employer or supervisor), certify that,  
\_\_\_\_\_ (student name) has completed the  
attached Work-Site Safety Checklist.

\_\_\_\_\_ (employer's or supervisor sig.)

# TIME SHEET

*(to be completed by the student)*

Student: \_\_\_\_\_ Company: \_\_\_\_\_

Student #: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Supervisor's Comments: \_\_\_\_\_

Day Date	Hours Worked	Tasks/Activities Performed	Supervisor's Initial
From: To:	Total Hours: <input style="width: 40px;" type="text"/>		
From: To:	Total Hours: <input style="width: 40px;" type="text"/>		
From: To:	Total Hours: <input style="width: 40px;" type="text"/>		
From: To:	Total Hours: <input style="width: 40px;" type="text"/>		
From: To:	Total Hours: <input style="width: 40px;" type="text"/>		
From: To:	Total Hours: <input style="width: 40px;" type="text"/>		
From: To:	Total Hours: <input style="width: 40px;" type="text"/>		

**Total Hours for Week:**

Student's Comments: \_\_\_\_\_

Student's Signature: \_\_\_\_\_

Date: \_\_\_\_\_