

DEFINITIONS

Apprenticeship is an instructional methodology which correlates concurrent formal vocational classroom instruction with regularly scheduled, paid on the job training. Apprenticeship is planned to meet the needs of a particular industry or occupation, the programs vary in length from one to five years. Apprentices are paid employees whose employment continues after completion of their program.

Community Classroom is an instructional methodology which utilizes unpaid on-the-job training experiences at business, industry, and public agency sites to assist students in acquiring those competencies (skills, knowledge, and attitudes) necessary to acquire entry-level employment. The intent of the community classroom methodology is to provide additional resources so concurrent, formalized classroom instruction can be extended and the acquisition of salable skills enhanced.

Cooperative Vocational Education is an instructional methodology which correlates concurrent, formal vocational classroom instruction with regularly scheduled, paid on-the-job training experience. Cooperative vocational education assists students to develop and refine occupational competencies (attitudes, skills, and knowledge) needed to acquire, adjust, and advance in an occupation.

Community Classroom Teacher is the certificated vocational education instructor, employed by the local educational agency operating a community instructional methodology, who provides the formal vocational classroom instruction, conducts the required visitations to on the job training stations, and verifies student acquisition of competencies identified in the training plan.

Cooperative Vocational Education Teacher is the certificated vocational education instructor, employed by the local educational agency, operating a cooperative vocational education instructional methodology, who provides the formal vocational classroom instruction, conducts the required visitations to competencies identified in the training plan.

Community Classroom Joint Venture Training Agreement is a written document that describes the conditions and requirements to be met by the local educational agency and management of the community classroom in the utilization of business, industry, and public agency resources for vocational instruction.

Cooperative Vocational Education Training Agreement is a written document, which describes the conditions and requirements to be met by those parties (school, employer, student, and parent) involved with the utilization of business and industry resources for vocational instruction.

Community Classroom Individualized Training Plan is a written document, which identifies those competencies the student will acquire through vocational classroom instruction and unpaid on-the-job training experiences.

Cooperative Vocational Education Individualized Training Plan is a written document, which identifies those competencies the student will acquire through vocational classroom instruction and paid on-the-job experiences.

The Management of the Community Classroom is the owner or designated employee(s), representing the entity offering its resources for vocational instruction, who assists the local educational agency in the operation of a community classroom.

Community Classroom Training Station is the business/industry or public agency location where the student receives his/her unpaid training experiences.

Cooperative Vocational Education Training Station is the business/industry location, public or private, where the student receives his/her regularly scheduled, paid, on-the-job training experiences.

Methodology means a technique or procedure used for teaching students skills.

Competency means the prescribed performance level for a skill, knowledge, and attitude necessary to accomplish a job task.

Concurrent Classroom Instruction means classroom instruction and unpaid/paid on-the-job training experiences are being conducted together within the same time frame (quarter, semester, program year, etc.).

Related Classroom Instruction means formal vocational instruction, which is correlated with unpaid/paid on-the-job training experiences.

Formal Vocational Instruction means instruction provided by a qualified teacher, utilizing a lesson plan, to a group of students in a classroom.

Supervision/Coordination are those activities performed by the community classroom/cooperative vocational education teacher, usually outside of the classroom that include, but are not limited to: advisory committee operation, program promotion/recruitment, selection of training stations, training plan development, relating in-school instruction to unpaid/paid on-the-job training, on-the-job student/employer visitations, and evaluation of student progress.

Productive Work unpaid on-the-job experiences are not considered productive if all of the following criteria are met: the training, even though it includes actual operation of the facilities in the community classroom, is similar to that which would or could be given in a vocational education course or occupational training program; the training is for the benefit of the students and is meaningful; the students do not displace regular employees but work under close observation; the community classroom manager providing the training derives no immediate advantage from the activities of the students; students are not necessarily entitled to a job at the conclusion of the training period; and the community classroom manager and the students understand that the students are not entitled to wages for the time spent in training.

Sources:

Title 5, California Administrative Code, Section 10080 and 10100,
Register 87, No. 50, December 12, 1987

New Community Classroom and Cooperative Vocational Education Regulations,
Career-Vocational Preparation Division, State Department of Education,
May 13, 1988

COMMUNITY CLASSROOM

COOPERATIVE VOCATIONAL EDUCATION

APPRENTICESHIP

OPERATING CONDITIONS

	Community Classroom	Cooperative Vocational Education	Apprenticeship
Student is paid	NO	YES	YES
Work permit is required (if under 18 years of age)	NO	YES	YES
Provider of worker's compensation insurance	Superintendent of County Schools	Employer	Employer
Minimum/maximum hours per week of on-the-job training	Per course outline schedule	28 hours	28 hours
Schedule of related classroom instruction	One period per week; average three periods per week for length of program	One period per week; average three periods per week for length of program	One period per week; average three periods per week for length of program
Schedule of supervision visits to training station	Once every three weeks	Once every four weeks	Once every four weeks
Responsible for supervision at training station	Teacher of related class	Teacher of related class	Teacher of related class
Attendance reporting	Maximum attendance hours per course outline schedule maximum 5 days per week. Classroom attendance is in addition to on-the-job training attendance.	Minimum 10 hours to a maximum 15 hours of attendance in any calendar week. Classroom attendance is in addition to on-the-job training attendance.	Minimum 10 hours to a maximum of 15 hours of attendance in any calendar week. Classroom attendance is in addition to on-the-job training attendance.
Student/teacher ratio	30 per class 75 per teacher	30 per class 75 per teacher	30 per class 75 per teacher
Training agreement required	YES	YES	YES
Individualized training plan required	YES	YES	YES



PROCEDURE FOR ADDING COMMUNITY CLASSROOM AND/OR COOPERATIVE VOCATIONAL EDUCATION METHODOLOGIES

The following is a list of items necessary for adding community classroom and/or cooperative vocational education methodologies to our instructional program.

- Revise course description to include percent of time for unpaid and/or paid practical experiences.
- Revise course outline to include columns for unpaid and/or paid on-the-job training hours.
- Develop training plan.
- If necessary, revise your course schedule to include on-the-job training hours.
- Have your occupational advisory committee review the above items.
- Locate and develop on-the-job training stations.

Please forward the above items to your ROP district designated representative. When received at the director's office, a VE77R adding community classroom and/or cooperative vocational education to your program will be sent to the State Department of Education for approval.

For additional information, contact your ROP district designated representative or call Tim Vanoli at (831) 753-4209.

TV/bbs

**MISSION TRAILS REGIONAL OCCUPATIONAL PROGRAM
INDIVIDUALIZED TRAINING PLAN**

____ COMMUNITY CLASSROOM
____ COOPERATIVE VOCATIONAL EDUCATION

____ Fall
____ Spring
____ Summer

Student Name _____ Home Phone _____
 School of Residence _____ District _____
 Birth Date _____ Social Security No. _____
 Program Title _____ Counselor _____
 Teacher _____ Teacher Phone No. _____

Training Stations

Business Name	Business Address	Manager/Supervisor	Phone No.

Training Schedule: Days _____ Hours _____

The purpose of this program is to assist the student in developing and/or expanding occupational competencies through a combination of related classroom instruction and on-the-job training experiences. In order to participate in the program the student must be concurrently enrolled in and attending the related classroom portion of the program, and conform to the rules and regulations of the training station. All parties involved in this program agree to comply with the conditions of the training agreement and all appropriate state and federal regulations. A copy of this training plan shall be maintained at the training station.

Teacher's Signature _____ Date _____

Students who provide their own private transportation (drive their own vehicle) must have a valid California driver's license and meet the financial responsibility requirements of California Vehicle Code Sections 16020 and 16021.

Student's Signature _____ Date _____

Parent/Guardian Signature (if student is under 18) _____ Date _____

Occupational Competencies	Expected Duration of Training by hours	Location of Training by hours		Teacher's Verification
		Classroom	OJT	

(Attach Additional Competencies)

This is to verify that _____ has acquired the competencies initiated by demonstrating a proficiency equivalent to entry-level employment.

Final Grade _____ Total Hours _____ Teacher's Signature/Date _____

Comments _____

**COMMUNITY CLASSROOM
TRAINING AGREEMENT**

The purpose of this program is to assist Regional Occupational Program students enrolled in _____ in developing the occupational competencies listed on their training plan through a combination of related classroom instruction and unpaid on-the-job training experiences.

The _____ School District cooperating with Mission Trails Regional Occupational Program (ROP) and _____ located at _____ mutually agree to the following responsibilities:

The Training Station Management Shall:

1. Have a clear understanding of program objectives and willingness to participate.
2. Be engaged in a business operation, which requires employment in the occupation for which the training is provided.
3. Provide the student with unpaid on-the-job training experiences in an environment that will not endanger the health, safety, welfare, or morals of the student.
4. Provide adequate equipment, materials, and other resources, which will expand the competencies developed in the related classroom instruction portion of the program.
5. Assist in developing a training agreement and training plan for each student.
6. Consult with community classroom teacher regarding the student's progress.
7. Maintain training records (including a copy of the training plan) at the training site.
8. Agree to defend, indemnify, protect, and hold harmless the school district, its officers, agents, and employees against any and all losses, injuries, claims, actions, judgments, and liens which arise from or are connected with the acts or omissions of the training station management, its officers, agents and employees.
9. Have the right to terminate student at management station with or without cause if student fails/refuses to conform to safe working practices or comply with reasonable directions of training management station.

The School District Shall:

1. Provide a related classroom instruction program for community classroom students that is: (a) scheduled an average of three instructional periods per week for the length of the program with a minimum of one instructional period per week, (b) based on the skills, knowledge, and attitude necessary for employment in the occupation for which training is conducted, (c) limited to community classroom students.
2. Release the community classroom teacher an average of one hour per week for every five students for supervision. A minimum of one hour per week shall be provided. (Only the teacher of the classroom portion will supervise the student's on-the-job training experiences).
3. Make supervision visits to training stations at least once every three weeks. (Each visit shall include an observation of the student engaged in on-the-job training experiences).
4. Limit the number of students enrolled in a community classroom section to 30 students with maximum of 75 students per full-time community classroom teacher
5. Locate and select training stations and plan on-the-job training experiences.
6. Prepare individualized training plans.
7. Monitor student's progress by completing the individualized training plan, provide ongoing and final student evaluation, grant graduation credit for acquisition of occupational competencies and evaluate progress.
8. Develop and keep file records, including: training agreements, training plans, on-the-job supervision observations, and on-the-job training site locations with students' training hours.
9. Agree to defend, indemnify, protect, and hold harmless the training station management, its officers, agents, and employees against any and all losses, injuries, claims, actions, judgments, and liens which arise from or are connected with the acts or omissions of the school district, its officers, agents, and employees.
10. Inform students of program rules and responsibilities.

All on-the-job training experiences provided at the above location shall be in accordance with the student's training plan, which includes occupational competencies and duration of training for attainment of each competency.

All training experiences shall be under the immediate supervision and control of a Regional Occupational Program teacher who is an employee of the school district and holds a valid California teaching credential. Upon determination by the teacher that the student has achieved a competency, the student shall be assigned to other competencies. A student who has attained a competency shall not continue those tasks encompassed by the competency without pay.

Unpaid on-the-job training experiences shall not: (a) provide the training station management with any immediate benefit, (b) allow a student to replace an employee or cause an employee's hours to be reduced, nor preclude the hiring of additional employee, (c) include productive work of any kind.

The School District is considered the legal employer. The _____ District shall carry Public Liability insurance and Worker's Compensation Insurance covering students enrolled in a Community Classroom course. The District shall carry Public Liability insurance and Worker's Compensation insurance covering the teacher of a Community Classroom course.

Neither the School District nor the training station management shall discriminate against any student or employee on the basis of race, color, national origin, sex, marital status, parental status, or handicap in employment practices or on-the-job training experiences.

Training Station Management's Signature

Telephone Number

Date

Vocational Education Director's Signature (or designee)

Telephone Number

Date

COOPERATIVE VOCATIONAL EDUCATION TRAINING AGREEMENT

The purpose of this program is to assist _____, a Regional Occupational Program student enrolled in _____ in expanding the occupational competencies listed on their training plan through a combination of related classroom instruction and paid on-the-job training experiences. The _____ School District, cooperating with Mission Trails Regional Occupational Program (ROP) and _____ located at _____ mutually agree to the following responsibilities:

The Student Shall:

1. Be at least 16 years of age, except a student with exceptional needs.
2. Have parent/guardian approval if under 18 years of age.
3. Be a full-time student.
4. Be concurrently enrolled in and attending the related classroom portion of the program.
5. Obey rules and regulations of the program.

The Training Station Employer Shall:

1. Have a clear understanding of program objectives and willingness to participate.
2. Provide adequately supervised paid on-the-job training experiences that (a) are regularly scheduled from a minimum of 8 hours to a maximum of 15 hours per week, (b) are in an occupation for which the programs approved, (c) will not endanger the health, safety, welfare, or morals of the student, (d) have adequate equipment, materials, and other resources, that provide an appropriate learning opportunity, (e) are in compliance with Federal and State Labor laws.
3. Assist in developing a training agreement and training plans.
4. Consult with cooperative vocational education teacher regarding the student's progress.
5. Maintain training records (including a copy of the training plan) at the training site.
6. Provide insurance coverage for employees in accordance with existing law.
Name of Worker's Compensation Insurance Company _____.
7. Compensate cooperative vocational education students at least at the minimum wage as stipulated by current California State Industrial Welfare Commission orders. (A work permit is required for all employees under 18 years of age).
8. Defend, indemnify, protect, and hold harmless the school districts, its officers, agents, and other employees against any losses, injuries, claims, actions, judgments, and liens, which arise from or are connected with the acts or omissions of the training station employer, its officers, agents, and employees.
9. Have the right to terminate student at management station with or without cause if student fails/refuses to conform to safe working practices or comply with reasonable directions of training management station.

The School District Shall:

1. Provide a related classroom instruction program for cooperative vocational education students that is: (a) scheduled an average of three instructional periods per week for the length of the program with a minimum of one instructional period per week, (b) organized to ensure that students will have sufficient hours of directly related classroom instruction and on-the-job training experiences necessary for employment and advancement in the occupation for which training is conducted, (c) limited to cooperative vocational education students.
2. Release the cooperative vocational education teacher an average of one hour per week for every five students for supervision. A minimum of one hour per week shall be provided. (Only the teacher of the classroom will supervise the student's on-the-job training experiences).
3. Make supervision visits to training stations at least once every four weeks, (No less than every second visit shall include an observation of the student engaged in on-the-job training experiences).
4. Select and approve students who qualify for enrollment and educational objectives.
5. Assist students with career planning and identifying employment and educational objectives.
4. Limit the number of students enrolled in a cooperative vocational education section to 30 students with maximum of 75 students per full-time cooperative vocational education teacher.
5. Prepare individualized training plans.
7. Monitor student's progress by completing the individualized training plan, provide ongoing and final student evaluation, grant graduation credit for acquisition of occupational competencies.
8. Develop and keep file records, including: evidence of work permits issued, training agreements, training plans, on-the-job supervision observations, and on-the-job training site locations with students' training hours.
9. Defend, indemnify, protect, and hold harmless the training station management, its officers, agents, and employees against any losses, injuries, claims, actions, judgments, and liens which arise from or are connected with the acts or omissions of the training station employer, its officers, agents, and employees.
10. Inform students of program rules and responsibilities.

Neither the School District nor the training station management shall discriminate against any student or employee on the basis of race, color, national origin, sex, marital status, parental status, or handicap in employment practices or on-the-job training experiences.

All Cooperative Vocation Education Training Agreements are contingent upon the student attending the related classroom portion of the program.

Student's Signature

Telephone Number

Date

Parent/Guardian Signature (if student is under 18)

Telephone Number

Date

Training Station Employer's Signature

Date

Vocational Education Director's Signature (or designee)

Date

MISSION TRAILS REGIONAL OCCUPATIONAL PROGRAM

867 East Laurel Drive, Salinas, CA 93905 (831) 753-4209

RECORD OF SUPERVISION VISITS

COMMUNITY CLASSROOM CO-OP ED APPRENTICESHIP WORK EXPERIENCE

STUDENT INFORMATION:

STUDENT _____ ID# _____ D.O.B _____

ADDRESS _____ ZIP _____ PHONE NO. _____

SCHOOL _____ GRADE _____ ENROLLED _____ DROPPED _____

EMPLOYER INFORMATION:

NAME OF BUSINESS _____ PHONE NO. _____

BUSINESS ADDRESS _____ SUPERVISOR _____

RECORD OF SUPERVISION VISITS:

*DATE	TIME	CODE	TEACHER OBSERVATION/SUPERVISOR COMMENTS

Codes: E=Deliver Evaluation C= Employer Conference S= Student Observation

- Community classroom training stations shall be visited at least once every three weeks. (Each visit shall include an observation of the student engaged in on-the-job training experiences).
- Cooperative vocational education training stations shall be visited at least once every four weeks. (No less than every second visit shall include an observation of the student engaged in on-the-job experiences).

EVALUATION RECEIVED: #1 _____ #2 _____ #3 _____ #4 _____

REGISTRATION PACKET CHECK LIST:

Work Permit Registration Individualized Training Plan Training Agreement

Course Credits/Requirements Program Rules & Responsibilities

TIME CARD/PAYSTUB VERIFICATION:

#1 _____ #2 _____ #3 _____ #4 _____ #5 _____ #6 _____

MISSION TRAILS REGIONAL OCCUPATIONAL PROGRAM

867 East Laurel Drive, Salinas, CA 93905 (831) 753-4209

JOB PERFORMANCE EVALUATION

Student _____ School _____ Instructor _____

Business _____ Supervisor _____ Phone _____

	Exceeds Job Requirements	Meets Job Requirements	Needs Improvement
DEPENDABLE AND RESPONSIBLE Dependable and punctual attendance			
APPEARANCE Dresses and grooms appropriately			
ATTITUDES Recognizes and respects authority Uses mature judgment Cooperative Constructive and positive			
USE OF TIME Uses time productively and efficiently Prioritizes and organizes work			
PERFORMANCE OF DUTIES Follows directions Complies with company rules Shows interest and enthusiasm Accepts constructive criticism			
COMMUNICATION Use of proper language Use of proper written and phone techniques Use of body language			
JOB SKILLS Interaction with fellow employees Initiative and motivation Accuracy and thoroughness Neatness of work			

Overall evaluation (circle one):

Exceeds Job Requirements

Meets Job Requirements

Needs Improvement

Comments: _____

Signature of Supervisor _____ **Date** _____

MISSION TRAILS REGIONAL OCCUPATIONAL PROGRAM

867 East Laurel Drive, Salinas, CA 93905 (831) 753-4209

MONTHLY TIME SHEET

_____ COMMUNITY CLASSROOM

_____ COOPERATIVE EDUCATION

_____ APPRENTICESHIP

_____ WORK EXPERIENCE

STUDENT NAME _____

STUDENT ID NUMBER _____

SCHOOL _____

PROGRAM _____

NAME OF BUSINESS _____

HOURS WORKED DAILY								
DATE:	SUN	MON	TUE	WED	THU	FRI	SAT	TOTAL PER WEEK
WEEK IN								
WEEK OUT								
TOTAL								

HOURS WORKED DAILY								
DATE:	SUN	MON	TUE	WED	THU	FRI	SAT	TOTAL PER WEEK
WEEK IN								
WEEK OUT								
TOTAL								

HOURS WORKED DAILY								
DATE:	SUN	MON	TUE	WED	THU	FRI	SAT	TOTAL PER WEEK
WEEK IN								
WEEK OUT								
TOTAL								

HOURS WORKED DAILY								
DATE:	SUN	MON	TUE	WED	THU	FRI	SAT	TOTAL PER WEEK
WEEK IN								
WEEK OUT								
TOTAL								

HOURS WORKED DAILY								
DATE:	SUN	MON	TUE	WED	THU	FRI	SAT	TOTAL PER WEEK
WEEK IN								
WEEK OUT								
TOTAL								

STUDENT SIGNATURE

DATE

EMPLOYER SIGNATURE

DATE

State guidelines for cooperative education/community classroom/WE require employer verification of hours worked by student. No credit will be issued without employer's signature.

Salinas Union High School District, Mission Trails ROP

EXTENDED WORK PERMIT CONTRACT

Most students have a "4 and 28" permit (4 hours maximum on school days, 28 hours maximum per week). Please check-off which extended permit you want.

_____ Late hours: can work until midnight on a school night BUT still only 4 hours per day, 28 hours per week.

_____ 6 hours per day on school days, maximum 36 hours per week.

_____ 8 hours per day, maximum 40 hours per week.

_____ Leave school at 12:00 to start working.

You can check-off more than one (example: late hours **and** 8 hours per day).

In order to qualify for an extended permit you must finish:

- The first three assignments
- Have perfect attendance (no tardies) for three class meetings.

After your extended permit is granted you must:

- continue to earn the privilege of an extended work permit.
- turn-in one assignment every week.
- have near perfect attendance. You must call me if you are absent. Every absence must be excused.

Your work permit will be pulled if you:

- fall more than two weeks behind on your assignments.
- fall below 90% attendance.
- miss class for any reason and fail to call me.
- go to work and have missed class. (You cannot work on a day that you miss school, even if you only miss one period).

School is your most important job and an extended work permit is a privilege and a responsibility.

By signing this agreement, you agree to follow these rules.

Before you agree to this, make sure that you:

- can handle the extra responsibilities.
- understand the conditions of an extended permit and when it will be revoked.

Your parents and employer must read, agree and sign this agreement.

Job Site

Phone Number

Employer Signature

Date

Student Signature

Date

Parent/Guardian Signature

Date

Instructor Signature

Date

Career Center Coordinator

Date

Signature

Date

CONTRACT

CO-OP REDUCED DAY

I am taking the ROP _____ CO-OP class. I _____
Understand that I must have excellent attendance and attend my CO-OP class weekly.

1. If I miss class, I may lose my ROP pass to leave campus early.
2. I will lose one credit for every 2 sessions missed per semester.
3. I may be dropped from class and have to add a 5th and 6th period or a 3rd block class. (This class counts for 2 classes).
4. I may have my work permit revoked.
5. I will receive a "U" in citizenship for:
 - A. 3 or more tardies in 1 semester
 - B. Excessive absences
 - C. Failure to consistently turn in assignments on time.
6. I understand this is a variable credit class and I may not receive full credit unless I actively meet all requirements. If I stop attending class and am not able to be dropped, I will receive an "F" and "U" for the quarter/semester.
7. I must keep an accurate time card and have it signed by my supervisor every 4 weeks. I will work an average of 10 to 15 hours per week in order to participate in the ROP _____ program. If I am working less than 10 hours in any week, I will talk to the instructor to make special arrangements to continue to be enrolled in the class.
8. I must clear all absences with the attendance office. If I miss class, I must call in my work hours for the week. As soon as I return to school after an absence, I must come into class and pick up missed assignments.

ROP Teacher

Telephone

I have read and understand the requirements to remain a "student in good standing".

Student Signature

Date

Parent Signature

Date

COMMUNITY CLASSROOM STUDENT PARTICIPATION REQUIREMENTS

The objective of Mission Trails Regional Occupational Program is to contribute to vocational training by providing an opportunity to participate in an actual job setting related to your career choice. Students will be actively involved and trained in the business community. Participants must comply with the standards and policies set by the training site.

1. Students must:
 - Have a valid Training Agreement
 - Have a valid Individual Training Plan
 - Attend class one day per week
 - Maintain and turn in Monthly Time Cards signed by employer(s)
 - Complete and turn in ALL assignments as scheduled
 - Call instructor and community classroom site if absent (clear with attendance office)

To receive full credit all requirements must be met. This is a variable credit class.

I (we) have read, discussed, understand, and agree with the expectations set by the Salinas Union High School District.

Student Signature

Date

Parent/Guardian Signature

Date

MISSION TRAILS REGIONAL OCCUPATIONAL PROGRAM

867 East Laurel Drive, Salinas, CA 93905 (831) 753-4209

**CO-OP/WORK EXPERIENCE
STUDENT PARTICIPATION REQUIREMENTS**

The objective of Mission Trails Regional Occupational Program is to contribute to vocational training by providing additional opportunities to participate in a class related to your career choice.

1. Students must:
 - Attend school in order to work the scheduled days
 - Attend co-op class weekly
 - Maintain a valid work permit for the place(s) of employment
 - Have a valid Training Agreement
 - Have a valid Individual Training Plan
 - Maintain and turn in Monthly Time Cards signed by employer(s)
 - Complete and turn in ALL assignments as scheduled
 - Be working an average of 10 to 15 hours per week

This is a variable credit class. Students will earn full credit if they meet requirements stated here and in the “Course Credit/Requirements” hand out. If a student stops attending class and does not drop, he/she will receive an “F” (failing grade) and a “U” (unsatisfactory) citizenship mark, with zero credits issued for that quarter/semester.

2. If a student misses a co-op class, he/she must:
 - Clear the absence upon returning to school with the attendance office
 - Come to class and enter work hours in the sign-in book
 - Turn in weekly assignment
 - Pick up new assignment

I (we) have read, discussed, understand, and agree with the expectations set by the Salinas Union High School District.

Student Signature

Date

Parent/Guardian Signature

Date

MISSION TRAILS REGIONAL OCCUPATIONAL PROGRAM

867 East Laurel Drive, Salinas, CA 93905 (831) 753-4209

STUDENT INFORMATION SHEET

					STUDENT ID NUMBER:	
LAST NAME:			FIRST:			MI:
STREET ADDRESS						
CITY:		ST:	ZIP:	SS#		
HOME PHONE:		AGE:	BIRTH DATE:		MALE: ___ FEMALE ___	
GRADE: 9 10 11 12		SCHOOL:			COUNSELOR:	
CIRCLE ETHNICITY:				CIRCLE TRANSPORTATION:		
1. AM INDIAN-ALASKA NATIVE		5. HISPANIC		WALK DRIVE BUS RIDE		
2. ASIAN		6. BLACK		OTHER:		
3. PACIFIC ISLANDER		7. WHITE				
4. FILIPINO						

The Regional Occupational Program is in compliance with the following federal and state regulations: Title VI and VII of the Civil Rights Act; the California Fair Employment Practices Act; Chapter 4 Division 1 of Title 5; the California Administrative Code; and Title IX (Nondiscrimination on the basis of sex) of the Educational Amendments of 1972.

PARENTAL DATA AND PERMISSION FOR EMERGENCY MEDICAL TREATMENT:

FATHER'S NAME:		HOME PHONE:
FATHER'S PLACE OF EMPLOYMENT:		BUSINESS PHONE:
MOTHER'S NAME:		HOME PHONE:
MOTHER'S PLACE OF EMPLOYMENT:		BUSINESS PHONE:

In a medical emergency, the school will make every effort to contact a student's parents. If a parent cannot be reached by telephone, the school has my permission to seek medical aid.

FAMILY PHYSICIAN: _____ **PHONE:** _____

ADDRESS: _____

PARENT/GUARDIAN SIGNATURE **DATE:**

ROP COORDINATOR SIGNATURE

MISSION TRAILS REGIONAL OCCUPATIONAL PROGRAM

867 East Laurel Drive, Salinas, CA 93905 (831) 753-4209

ASSIGNMENT CHECKLIST

STUDENT NAME _____ DATE OF BIRTH _____

ADDRESS _____ ID NUMBER _____

PARENT/GUARDIAN _____ TELEPHONE NUMBER _____

1 ST TERM	P	F	CITIZENSHIP	O	S	U	CREDIT _____
2 ND TERM	P	F	CITIZENSHIP	O	S	U	CREDIT _____
SEMESTER GRADE	P	F					
3 RD TERM	P	F	CITIZENSHIP	O	S	U	CREDIT _____
4 TH TERM	P	F	CITIZENSHIP	O	S	U	CREDIT _____
FINAL GRADE	P	F					

STUDENT SCHEDULE

PLEASE USE PENCIL.

PERIOD

1 _____	TEACHER _____	ROOM _____
2 _____	TEACHER _____	ROOM _____
3 _____	TEACHER _____	ROOM _____
4 _____	TEACHER _____	ROOM _____
5 _____	TEACHER _____	ROOM _____
6 _____	TEACHER _____	ROOM _____

COUNSELOR _____ PHONE _____

ASSIGNMENT CHECK LIST

ASSIGNMENT #1 REG _____

ASSIGNMENT #2 _____

ASSIGNMENT #3 _____

ASSIGNMENT #4 _____

ASSIGNMENT #5 _____

ASSIGNMENT #6 _____

ASSIGNMENT #7 _____

ASSIGNMENT #8 _____

ASSIGNMENT #9 _____

ASSIGNMENT #10 _____

ASSIGNMENT #1 _____

ASSIGNMENT #2 _____

ASSIGNMENT #3 _____

ASSIGNMENT #4 _____

ASSIGNMENT #5 _____

ASSIGNMENT #6 _____

ASSIGNMENT #7 _____

ASSIGNMENT #8 _____

ASSIGNMENT #9 _____

MISSION TRAILS REGIONAL OCCUPATIONAL PROGRAM CO-OP/WORK EXPERIENCE CLASS RECORD

STUDENT INFORMATION:

STUDENT _____ ID# _____ PHONE _____

SCHOOL _____ GRADE _____ ENROLLED _____ DROPPED _____

EMPLOYER INFORMATION:

NAME OF BUSINESS _____ PHONE: _____

BUSINESS ADDRESS _____ SUPERVISOR _____

Month	Wk	Month/Day	Att.	Assignment	M/D Rec'd	Hrs.	Comments
1	1						Hours
	2						Evaluations
	3						
	4						
Month							
2	5						
	6						
	7						
	8						
Month							
3	9						
	10						
	11						
	12						
Month							
4	13						
	14						
	15						
	16						
Month							
5	17						
	18						
	19						
	20						
Grade Pass Fail Inc. Citizenship O S U Credits _____							
Grade Pass Fail Inc. Citizenship O S U Credits _____							
Comments							

MISSION TRAILS REGIONAL OCCUPATIONAL PROGRAM

867 East Laurel Drive, Salinas, CA 93905 (831) 753-4209

COURSE CREDIT/REQUIREMENTS

TO EARN TOTAL CREDITS LISTED IN COLUMN 1 STUDENT MUST COMPLETE THE FOLLOWING REQUIREMENTS:

TO EARN	*BE IN PROGRAM	SATISFACTORY COMPLETE	**ATTEND CLASS	SIGNED MONTHLY TIME CARDS/PAYSTUB
10 Credits	17-18 Weeks	18 Assignments	17 Times	270 Hours (15 average hours a week)
9 Credits	15-16 Weeks	16 Assignments	15-16 Times	240 Hours (15 average hours a week)
8 Credits	13-14 Weeks	14 Assignments	13-14 Times	210 Hours (15 average hours a week)
7 Credits	11-12 Weeks	12 Assignments	11-12 Times	180 Hours (15 average hours a week)
6 Credits	10-11 Weeks	11 Assignments	10-11 Times	150 Hours (15 average hours a week)
5 Credits	8-9 Weeks	9 Assignments	8-9 Times	120 Hours (15 average hours a week)
4 Credits	6-7 Weeks	7 Assignments	6-7 Times	90 Hours (15 average hours a week)
3 Credits	4-5 Weeks	5 Assignments	4-5 Times	60 Hours (15 average hours a week)
2 Credits	3-4 Weeks	4 Assignments	3-4 Times	45 Hours (15 average hours a week)
1 Credit	2 Weeks	3 Assignments	1-2 Times	30 Hours (15 average hours a week)

*Enrollment begins when all required paper work is completed and returned to the Career Center.

**This is a mandatory class usually held before school. Students with excused absences are eligible for make up assignments.

Co-Op/WE credit – Between 0 and 10 credits may be earned per semester. No more than 5 credits will be issued per quarter. If a student is unwilling to meet the criteria, the student will receive no credit and will be dropped from the program.

Name of Student _____ Date Enrolled* _____

Maximum Credits Possible _____ Instructor's Signature _____ Date _____

DIS.	CO.	DAS FILE NO.	DOT CODE	CONS	COR.	TYPE	START	COMPLETE	MOS.	AGE	YET.	STAT.
2	2	5	9	3	1	1	1 2	1 2	2	2	1	1

State of California — Department of Industrial Relations — DIVISION OF APPRENTICESHIP STANDARDS



APPRENTICE AGREEMENT

APPRENTICE NAME			SOCIAL SECURITY NO.		
APPRENTICE ADDRESS (NUMBER AND STREET, CITY AND ZIP CODE)			COUNTY OF RESIDENCE		
OCCUPATION					
TERM OF APPRENTICESHIP		STRAIGHT TIME		IN AGREEMENT WITH (5)	
Hours Within	Years	Hours per Day:	Hours per Week:		

AGREEMENT: The undersigned parties mutually agree that they will use their best endeavors to secure employment and training for the apprentice. The apprentice agrees to perform satisfactorily all work and learning assignments. The provisions of the Apprenticeship Standards for the above occupation adopted by the employer and/or the union and/or the apprenticeship committee and approved by the Chief of the Division of Apprenticeship Standards, are hereby made a part of this agreement. An official copy of the standards is on file in the headquarters of the Division of Apprenticeship Standards. This apprentice agreement will continue in effect until the training is completed or otherwise terminated in accordance with the standards.

EVALUATION: The apprentice commenced training under these standards on _____, 19____. The signatory apprentice is credited with having _____ months toward completion of the term of apprenticeship prior to the above date. The apprentice is expected to complete training on or about _____, 19____, upon satisfactory completion of the total remaining hours of on-the-job training and hours and/or units of related and supplemental instruction.

APPRENTICE: I, the undersigned apprentice, understand and agree that there is a valid and reasonable necessity that those academic records accumulated throughout related and supplemental instruction during my period of apprenticeship be made available to the apprenticeship committee. Further, I agree to release to the apprenticeship committee any other academic records which I feel may enhance my status as an apprentice.

SIGNATURES	
APPRENTICE SIGNATURE	NAME OF EMPLOYER
APPRENTICE BIRTHDAY	ADDRESS OF EMPLOYER
VETERAN? <input type="checkbox"/> YES <input type="checkbox"/> NO	
IF YES C Number:	BY — SIGNATURE
SIGNATURE OF PARENT OR GUARDIAN (IF APPRENTICE IS 16 OR 17)	TITLE
AGREED AND APPROVED	
NAME OF APPRENTICESHIP COMMITTEE	
SIGNATURE—SECRETARY / CHAIR / COORDINATOR	DATE
SIGNATURE—APPRENTICESHIP CONSULTANT	DATE

TO THE APPRENTICE. California Civil Code Sec. 1795.17 requires State agencies which collect personal information to indicate the authority under which the data are requested. If personal information, not specifically authorized by law is requested, individuals must be informed that supplying the information is voluntary. It also provides that state agencies may change or modify records at the request of the individual.

Questions B and E below are voluntary. All others are authorized by law, as indicated by the reference in each section. If the authorized questions are not answered, the apprentice agreement cannot be accepted.

The agreements are filed in the Headquarters Office of the Division of Apprenticeship Standards, 455 Golden Gate Ave., Room 1193, San Francisco, CA 94102. The Supervising Clerk is in charge of the Records (telephone 415-703-4261). Questions or requests regarding these records should be addressed to the Supervising Clerk. Information is not transferred in any form which would identify an individual. Information collected on the Apprentice Questionnaire is used to measure, over a period of years, changes in the characteristics of apprentices. Ethnic information and sex are used to measure the extent of compliance on the part of program sponsors with the California Plan for Equal Opportunity in Apprenticeship.

The Division hopes, through collection of this data, to improve the apprenticeship program both for those presently enrolled and for future apprentices. Thank you.

CALIFORNIA APPRENTICE QUESTIONNAIRE

(USE INK OR BALLPOINT PEN)

A. Sex

MALE

1

FEMALE

3

(Cal. Code of Regulations, Title 8, Ch. 2, Sec. 215)

B. Number of Dependents (Do not count yourself)

0 None

1 One

2 Two

3 Three

4 Four

5 Five

6 Six or More

(Voluntary)

C. Race or Ethnic Derivation (Check one only)

1 **WHITE** (Not of Hispanic Origin)—A person having origins in any of the original peoples of Europe, North Africa or the Middle East.

2 **BLACK** (Not of Hispanic Origin)—A person having origins in any of the Black racial groups of Africa.

3 **ASIAN OR PACIFIC ISLANDER**—A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent or the Pacific Islands. The area includes, for example, China, Japan, Korea and Samoa.

6 **FILIPINO** (Cal. Gov. Code Sec. 11092)

4 **AMERICAN INDIAN OR ALASKAN NATIVE**—A person having origins in any of the original peoples of North America, and who maintains cultural identification through tribal affiliation or community recognition.

7 **HISPANIC**—A person of Mexican, Puerto Rican, Cuban, South Central American or other Spanish culture or origin, regardless of race.

(Cal. Labor Code, Ch. 4, Div. 3, Sec. 151)

D. Highest Year of Education Completed

1 8th Grade or less

2 9th Grade

3 10th Grade

4 11th Grade

5 12th Grade (or GED Certificate)

6 1 Year of College

7 2 Years of College

8 3 Years of College

9 4 or more Years of College

(Cal. Labor Code, Ch. 4, Div. 3, Sec. 3076.3)

E. Number of Years You Have Been Employed Full-Time to Date (Except for Military Service)

0 None

1 Less Than 1 Year

2 1 But Less Than 2 Years

3 2 But Less Than 3 Years

4 3 But Less Than 4 Years

5 4 But Less Than 5 Years

6 5 Years or More

(Voluntary)

F. Have You Served on Active Duty (other than in reserve status) in the U. S. Armed Forces?

Yes

No

If Yes, Please Enter:

Month and Year Entered _____

Month and Year Separated _____

Total Months Served on Active Duty _____

(Title 38, U. S. Code)

G. Month and Year of Birth. Enter two digits for month (0-12) and last two digits of year.

Example: January 1950 = 01/50

Month Year

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(Cal. Labor Code, Ch. 4, Div. 3, Sec. 3076)

H APPRENTICE: Do Not Write in this Space.

G SIC Code (Type of Business) of Employer

Apprentice's Signature _____

Date Signed _____

APPRENTICESHIP STANDARDS
 (UNILATERAL - SINGLE EMPLOYER)

NAME OF PROGRAM SPONSOR _____

STREET ADDRESS _____ CITY _____ ZIP CODE _____ COUNTY _____
 OCCUPATION _____ DOT CODE _____

The administration and operation of this apprenticeship program shall be supervised by the party signatory to these standards or a designated authorized representative. The apprenticeship program shall be subject to the review and approval by the Chief, Division of Apprenticeship Standards

Term of apprenticeship: _____ hours, the first _____ hours of which shall be a probationary period.

Ratio: The program sponsor may employ one apprentice when he has a least _____ journeymen employed and one additional apprentice for every _____ additional journeymen regularly employed.

Wage Schedule: Apprentices shall be paid not less than the following percentages of the current journeyman's rate, which as of _____ is \$ _____ per _____.

(Straight time hours per day _____ per week _____)

Overtime Compensation: _____

Period	% and Amount	Period	% and Amount	Period	% and Amount
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Other Compensation _____

Hours of related instruction _____ per year. Required school time shall/shall not be compensated. If compensated rate shall be: _____

Work processes to be learned: (See attachment A)

Responsibilities of program sponsor: The program agrees to: (1) select apprentices on the basis of qualifications through fair and impartial procedures applied uniformly to all applicants, as required under Title 29 of the Code of Federal Regulations, Part 30 and by the California Plan for Equal Opportunity in Apprenticeship and by the California Administrative Code, title 8, chapter 2; (2) provide reasonably continuous employment to all apprentices in its employ; (3) provide the diversified training scheduled herein under competent trainers, including safety training through the program and first aid training, either in conjunction with the apprentices, related instruction classes or otherwise as appropriate; (4) provide the related instruction where not provided by the local schools; (5) maintain a record of each apprentice's work training, related instruction and program herein; (6) file a copy of each apprentice agreement with the Secretary of the California Apprenticeship Council; (7) grant apprentice credit for previous experience; and (8) consult with the representative of the Administrator prior to the discipline or discharge of apprentice. (9) provide training in the recognition of illegal discrimination and sexual harassment.

EDUCATION _____

The recruitment, selection, employment, and training of apprentices during their apprenticeship, shall be without discrimination on the basis of race, color, religion, national origin or sex. The sponsor will take affirmative action to provide equal opportunity in apprenticeship for both minorities and women and will operate the apprenticeship program as required under Title 29 of the Code of Federal Regulations, Part 30, and equal employment opportunity regulation of the State of California.

Apprentice Agreements: Apprentices shall be at least 16 years of age. An apprentice is one who has signed an individual apprentice agreement with the program sponsor under these standards, which agreement has been approved by the Chief of his duly authorized representative and filed with the California Apprenticeship Council. Apprentice agreements may be cancelled by the Chief during the probationary period at the request of either party; after the probationary period apprentice agreements shall be cancelled by the Administrator by mutual consent of the parties or for good and sufficient reason. An apprentice agreement shall remain in effect during a lay-off unless cancelled.

Hours and working conditions: The regular work day, work week and other working conditions for apprentices shall conform to all applicable laws and regulations. Overtime shall not interfere with nor impair training nor be detrimental to the health and safety of the apprentice.

Responsibilities of apprentices: Each apprentice shall satisfactorily perform all work and learning assignments, and complete a course of related instruction, as determined in accordance with California Labor Code Section 3078(d). There shall be no liability on the part of the employer for an injury sustained by an apprentice engaged in school work at a time when employment of the apprentice has been temporarily or permanently terminated.

Disciplining of apprentice: Disciplinary proceedings for apprentices shall be duly noticed to such individuals. The Division of Apprenticeship Standards shall audit all such proceedings. All controversies or differences concerning an apprentice agreement which cannot be adjusted locally, shall be submitted to the Administrator of Apprenticeship for determination.

Certificate of completion: A certificate of completion will be issued by the California Apprenticeship Council to apprentices upon receipt of competent evidence of their satisfactory completion of apprenticeship hereunder.

Modification of standards: These standards shall be modified to conform to any changes in prevailing practice, conditions and wages in the area and the industry if and when such changes occur. Requests of the program sponsor for modification are subject to the approval of the Chief, Division of Apprenticeship Standards.

Where rules and regulations for governing the program are established by the program sponsors, a copy of such shall be provided to each apprentice.

The foregoing standards are hereby agreed to by the program sponsor as of _____ (date).

By _____ Title _____ (date).

Sponsors designee authorized to administer the apprenticeship program:

NAME TITLE/DEPT.

NAME TITLE/DEPT.

The foregoing standards, being in conformity with the rules and regulations of the California Apprenticeship Council, California Code of Regulations, and applicable Federal Regulations are hereby approved on _____ effective _____.

By: _____
Apprenticeship Consultant
(Authorized Representative of Administrator)

Chief
Division of Apprenticeship Standards

Address: _____

Veterans: The program sponsor further hereby applies and agrees to train eligible veteran apprentices in its employ on the terms and conditions set forth in the "Montgomery GI Bill", and to file documents required by the Veterans Administration and the Division of Apprenticeship Standards for the purpose of entering and maintaining veterans in its training program.

The foregoing Chapter 30 approval is hereby agreed to by the program sponsor as of _____ (date)

By: _____ Title: _____