



Teresa Ferri - Off Campus Education Coordinator
Sturgeon Composite High School
Morinville/Sturgeon Learning Centres
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Off-campus Education 15, 25, 35

Course Outline

Off-campus Education integrates a student's academic study and related work experience with cooperating employers in the appropriate fields of business, industry, government, social services and other professions.

The Off-Campus Education experience provides students with the opportunity to:

- explore occupations and test career decisions;
- acquire credible references for post-secondary education and/or employment;
- rehearse and test job search skills with employers;
- obtain 3 to 30 high school credits utilizing the workplace as the classroom.

Course Prerequisites: HCS3000 and HCS3010 (optional) Workplace Safety Courses, AGR3000 (for Green Certificate Program)

General Outcomes: The objectives of the Off-Campus Education Program are that the students will:

- (a) have an opportunity to participate in meaningful work;
- (b) realize the importance of developing acceptable work habits and the need for self-discipline in the work place;
- (c) develop an understanding of positive attitudes for getting along in the workforce;
- (d) observe employer and employee relationships in a work setting;
- (e) put into practice acquired knowledge of application forms, references, resume writing and job interview situations;
- (f) be enabled to explore career opportunities at the source;
- (g) generally receive assistance in making the transition from school to the working world.

Evaluation: All three Work Experience courses will be evaluated based on employability skills and workplace skills as outlined on the Student Evaluation Form, available from your Off-campus Education Coordinator. Student marks are based on employer evaluation. Students will receive credits based on their hours worked. Final timesheets and student evaluations are required by January 15th for first semester reporting or June 15th for second semester reporting. Summer school reports are required by month end in July and August.

Students may receive credits at the 15, 25 and/or 35 level. Students receive **5 credits for every 125 hours** based upon successful completion of school and workplace learning expectations.

NOTE: A maximum of 15 credits in Work Experience can be counted towards the High School Diploma. Students can receive credits for paid or volunteer work.



OFF-CAMPUS EDUCATION WORK AGREEMENT

Between Sturgeon School Division #24(the "Division"), _____(the "Employer")
and _____(the "Student") and _____("Parent / Legal Guardian")

"Whereas the Student agrees to be employed and the Employer agrees to employ the Student as part of the "Off-Campus Education" ("The Program"), the parties agree to be bound by the following terms and conditions of this Agreement."

Student's Name _____ Alberta Ed# _____
Address _____ Prerequisite _____ Grade _____
City/Postal Code _____ Cell# _____ DOB _____
Parent/Guardian Name _____ Parent/Guardian Phone# _____

School: _____ School Phone# _____
School Contact: Teresa Ferri Cell # 780-222-5008 Email: Teresa.Ferri@sturgeon.ab.ca

Name of Employer _____ Supervisor _____
Company Address _____ Phone # _____ Fax _____
City/Postal Code _____ Supervisor's Email _____

1. General Terms

1. This agreement shall be in force from _____("Program Start Date") to _____("Program End Date"), unless terminated.
2. Employment days shall take place between _____ and _____. Employment hours shall take place between _____ and _____. Should student's hours exceed these stipulated above, The Division and Employer warrant that additional health and safety parameters will be put in place to effectively support the student.
3. Any Party hereto may terminate this Agreement prior to completion by giving to the other parties hereto written notice of such termination. Such written notice shall be delivered to the representative of the Division and Employer and the Parent / Guardian depending on which party is giving the notice. Such notice shall be effective on the date of delivery of such notice.
4. Protection from Liability: In consideration of the Division having arranged for the Program, it is agreed by the Student and the Parent/Guardian that the Division shall not be liable for any damage or injury or claim whatsoever arising out of any act or omission of the Division or any other party to this Agreement. The undersigned student and parent or guardian release the Division and its agent and employees from any such liability. The undersigned Student and Parent/Guardian agree to indemnify and save harmless the Division and its agents and employees with respect to any expenses, costs or liability whatsoever arising out of any damage or injury occurring in or in connection with employment provided hereunder for the Student.
5. Important Information: The student is considered to be a "worker" of the Government of Alberta for purposes of Worker's Compensation while working under this agreement.

2. Student Obligations

1. Work Diligently: The student will diligently perform work for the employer on the days and times scheduled.
2. Follow Rules: The student agrees to follow the instructions of the employer and obey all of the employer's safety regulations and rules while on the employer's premises. The Student must also comply with any Division policies or rules applicable to the Program.

3. Employer's Obligations

1. Supervision: The employer will directly supervise and control the work of the student during the work periods.
2. Access: The employer will allow the Division representatives access to the employment site and student at all times.
3. Safety: The employer will ensure that the student is provided with a safe working environment and is not exposed to any unreasonable or unlawful risk or dangers on the work site. The employer confirms that the work site is in compliance with all applicable legislation, including but not limited to, the Employment Standards Code, the Labour Relations Code, the Occupational Health and Safety Act (Canada), Workplace hazardous Materials Information System guidelines, and local and provincial health, safety, and building standards.
4. Assessment: The employer will, if requested by Division staff, provide information relating to the student's work performance and complete any related documentation provided by the Division for this purpose.
5. The Employer understand that the Student is inexperienced and that there is no warranty as to his or her qualifications.
6. Protection for other employees: The employer will not allow the student's employment to affect the job security of any of its full-time employees or the availability of full-time employment for other persons.
7. Insurance: The employer confirms that the student is covered in the same manner as other employees under valid general liability and automobile insurance policies.

2. Division Obligations

1. Approval of Program: Division staff are responsible for planning and approving the student's Off-Campus Education, including the specific knowledge, skills, and attitudes the student is to acquire.
2. Evaluation: Division staff will evaluate the knowledge, skills, and attitudes the student acquires to determine if the awarding of credits will be recommended.

Employer signature _____ Student signature _____

Division _____ Parent / Guardians signature _____



**Off-campus Education
Learning Plan – 10%**

Teresa Ferri – Off-campus Education Coordinator
Phone: (780) 222-5008
Email: teresa.ferri@sturgeon.ab.ca

Student Name _____

Student Address _____

Student Cell Phone Number _____

List of tasks and/or duties expected to be performed by student:

New skills expected to have been learned by student at completion of the Program:

PLEASE RETURN THIS FORM ALONG WITH YOUR COMPLETED AND SIGNED,
OFF-CAMPUS EDUCATION AGREEMENT, TO MS. TERESA FERRI

“Together We Can Influence Tomorrow”



Student Time Sheet – 10%

Teresa Ferri - Off-campus Education Coordinator
 Phone: (780) 222-5008
 Email: teresa.ferri@sturgeon.ab.ca

Student:		Month:	
Company:		Supervisor:	
Previous Hours:	Hours this month:	Total Hours Accumulated:	

Date	Day of Week	Time In	Time Out	Total Hours Today	Duties/Tasks/Activities Performed
1					
2					
3					
4					
5					
6					Supervisor's Initial:
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					Supervisor's Initial:
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					Supervisor's Initial:
27					
28					
29					
30					
31					

Total Hours for Month _____

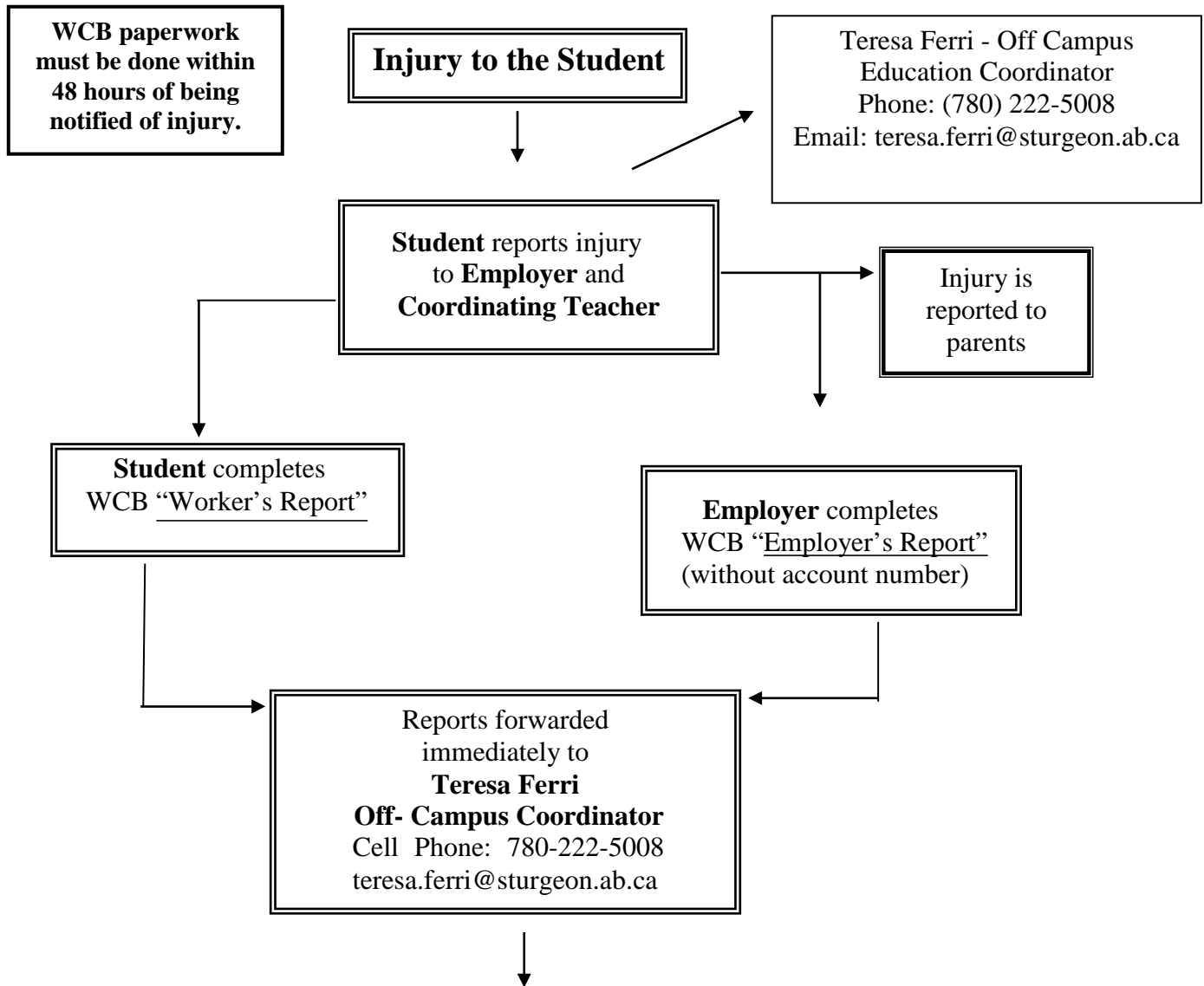
Is teacher contact required at this time? yes _____ no _____

Student Workers' Compensation coverage through the Government of Alberta applies only between the hours of 6 am. & 11 pm. (Monday - Sunday)



OFF-CAMPUS INJURY PROTOCOL

In the event that an injury occurs to the student you are supervising on the job site, please follow this protocol. **First and foremost, please ensure that the student receives immediate first aid and/or medical treatment.**



RAP Coordinator:

- Check accuracy of reports
- Insert Alberta Education's claim number
- Sign name and add "on behalf of ALBERTA EDUCATION"
- Fax both completed forms within 72 hours of accident to:
Curriculum Branch (780) 422-0576
Workers' Compensation Board (780) 427-5863
- Maintain original copies of forms
- Consult with employer on how to prevent similar incidents from occurring



Employer's Evaluation of Student - 50%

Student:	Date:	Course:
Business:	Phone:	Fax:
Evaluated By:		Email:

Hours to date (as previously reported) hours

Please rate the student by **circling the number** that best describes this student

4 = Outstanding, 3 = Very Good, 2 = Satisfactory, 1 = Unsatisfactory

<i>WORK QUALITIES AND HABITS</i>		<i>COMMENTS</i>
Punctuality	4 3 2 1	
Attendance	4 3 2 1	
Follows safety and health regulations	4 3 2 1	
Ability to learn job skills	4 3 2 1	
Follows instructions	4 3 2 1	
Accepts responsibility	4 3 2 1	
Productive in performing work	4 3 2 1	
Shows initiative - eager to learn	4 3 2 1	
Reliability - completes tasks on time	4 3 2 1	
Demonstrates planning ability	4 3 2 1	
Total	<u> </u> /40	
<i>WORK SKILLS</i>		<i>COMMENTS</i>
Ability to meet company's work standards	4 3 2 1	
Completes work accurately	4 3 2 1	
Safe use of equipment and tools	4 3 2 1	
Care of material and supplies	4 3 2 1	
Maintains an organized and safe work area	4 3 2 1	
Total	<u> </u> /20	
<i>COMMUNICATION SKILLS</i>		<i>COMMENTS</i>
Listens attentively	4 3 2 1	
Asks questions when unsure	4 3 2 1	
Accepts advice and constructive criticism	4 3 2 1	
Effective spoken and written skills	4 3 2 1	
Timely recordkeeping - logs etc.	4 3 2 1	
Total	<u> </u> /20	
<i>PERSONAL AND SOCIAL QUALITIES</i>		<i>COMMENTS</i>
Works well with others	4 3 2 1	
Attitude towards job	4 3 2 1	
General grooming - neat and clean	4 3 2 1	
Suitably attired for the job -PPE if required	4 3 2 1	
Demonstrates strong work ethic	4 3 2 1	
Total	<u> </u> /20	

/100

Student's Signature

Employer's Signature



Student Self Evaluation - 10%

Student:	Date:	Course:
Business:	Phone:	Fax:
Evaluated By:		Email:

Hours to date (as previously reported) hours

Please rate the student by **circling the number** that best describes this student

4 = Outstanding, 3 = Very Good, 2 = Satisfactory, 1 = Unsatisfactory

WORK QUALITIES AND HABITS		COMMENTS
Punctuality	4 3 2 1	
Attendance	4 3 2 1	
Follows safety and health regulations	4 3 2 1	
Ability to learn job skills	4 3 2 1	
Follows instructions	4 3 2 1	
Accepts responsibility	4 3 2 1	
Productive in performing work	4 3 2 1	
Shows initiative - eager to learn	4 3 2 1	
Reliability - completes tasks on time	4 3 2 1	
Demonstrates planning ability	4 3 2 1	
Total	<input type="text"/> /40	
WORK SKILLS		COMMENTS
Ability to meet company's work standards	4 3 2 1	
Completes work accurately	4 3 2 1	
Safe use of equipment and tools	4 3 2 1	
Care of material and supplies	4 3 2 1	
Maintains an organized and safe work area	4 3 2 1	
Total	<input type="text"/> /20	
COMMUNICATION SKILLS		COMMENTS
Listens attentively	4 3 2 1	
Asks questions when unsure	4 3 2 1	
Accepts advice and constructive criticism	4 3 2 1	
Effective spoken and written skills	4 3 2 1	
Timely recordkeeping - logs etc.	4 3 2 1	
Total	<input type="text"/> /20	
PERSONAL AND SOCIAL QUALITIES		COMMENTS
Works well with others	4 3 2 1	
Attitude towards job	4 3 2 1	
General grooming - neat and clean	4 3 2 1	
Suitably attired for the job -PPE if required	4 3 2 1	
Demonstrates strong work ethic	4 3 2 1	
Total	<input type="text"/> /20	

/100

Student's Signature

Employer's Signature



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Off –campus Education Reflection Assignment – 20%

Write a 300 - 500 word essay reflecting on your experience. The following may be used as a guideline, but do not feel bound by the suggestions.

It may be helpful to start with a brief description of your work site and your duties. Outline the areas that offered the most opportunities to learn and improve your skills and describe whether your learning goals were met. Reflect on whether you were given enough instruction, challenge, variety and meaningful work.

Describe your awareness of workplace safety and how it was applied and reinforced in your workplace. Please give examples.

Consider whether the experience helped you to make a more informed decision about your future education and/or career choices and describe how you have refined your career path. As well, please note your personal goals for the work experience program and reflect on whether they were met or exceeded.

Please describe the most positive aspects of your placement as well as the drawbacks of your particular situation. Finally, do not hesitate to make recommendations for improvement in the program or the placement.

This reflection may be shared with your employer in order to encourage understanding of the valuable learning opportunities for students in the workplace.

This assignment is worth twenty percent of your total course mark as set out in the following rubric, and must be submitted on the due dates as follows:

Semester One – January 5th.

Semester Two – June 5th

Summer Program – August 25th



Off-campus Education – Reflection Rubric

Category	Outstanding 5	Exceeds Standard 4	Meets Standard 3	Developing 2	Does Not Meet Standard 1	Total
Summary of learning environment and description of learning goals and analysis of instruction and challenges	A thoughtful description of worksite and opportunities to learn is provided, along with a thorough discussion of learning goals and outcomes including relevant examples.	The learning environment is described and learning opportunities, goals and outcomes are discussed.	The learning environment is described and a simplistic overview of learning goals and outcomes is noted.	This paper provides a very brief description of workplace with no discussion of goals, instruction or challenges.	Learning environment is not described, and learning goals, instruction and challenges are not discussed.	10
Examination and description of safety considerations	Detailed description of safety issues relevant to the specific workplace including examples is offered.	Safety considerations at this particular worksite are identified and examined.	A general understanding of workplace safety is demonstrated.	Safety issues and dangers are mentioned briefly with minimal connection to worksite.	An understanding of safety considerations at the workplace is not demonstrated.	5
Workplace education and career path connection is discussed	Thoughtful analysis of connection between off-campus learning and career path is evident.	Relevant off-campus learning goals are tied to career path.	A connection between off-campus learning and career path is understood and described.	An understanding of the connection between off-campus learning and future goals is limited.	An attempt to connect the worksite learning and career path is not evident.	5
Organization/ Language/ Format/Style	Strong, effective communication, organization and effective use of grammatical conventions is displayed.	Effective communication, organization and appropriate use of grammatical conventions is demonstrated.	Adequate communication, organization and use of grammatical conventions is provided.	Significant errors in structure, organization and use of conventions hinders communication.	Many significant errors in structure, organization and conventions, limits comprehension	



OFF-CAMPUS EDUCATION WORK STATION/WORK SITE INSPECTION CHECKLIST

Company: _____ Date of inspection: _____

Work Site Location: _____ Student Name: _____

- 1. Do you have a company health and safety program? yes no
- 2. Is job related health and safety training provided to new workers? yes no
- 3. Do you have a current copy of the Occupational Health and Safety Act, Regulations and Code readily available to workers? yes no
- 4. Is your work site Occupational Health and Safety compliant? yes no
- 5. What tools, materials and equipment will the student be handling?

- | | | | |
|---|---------------|------------------------------|-----------------------------|
| 6. Potential hazards/dangers of the job: | Psychological | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| Chemical <input type="checkbox"/> yes <input type="checkbox"/> no | Physical | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| Biological <input type="checkbox"/> yes <input type="checkbox"/> no | Ergonomic | <input type="checkbox"/> yes | <input type="checkbox"/> no |

7. Will the student be made aware of these hazards/dangers? yes no
How?

8. Will you provide for onsite supervision? yes no

8. Are you aware of the process for reporting a student injury? yes no
(Student is regarded as an employee of Alberta Education for WCB coverage)

9. Is there personal protective equipment (PPE) used at this worksite? yes no
If yes, please answer below:

- a) PPE provided by employer, OR
 - b) Students are responsible for bringing their own PPE.
- Please list: _____ yes no

9. What emergency procedures and equipment are in place?

- Does any of your staff have valid, current first aid training? yes no
- Fire extinguishers, first aid kits readily accessible? yes no

10. Work station/site:

- appears to provide an orderly, well-maintained, safe and caring environment. Approved
 - does not appear to be safe and caring at this time Not Approved
- If not approved please attach rationale or required follow up.

Signature: _____ Teacher/Coordinator