

# SARALAND HIGH SCHOOL 2020-2021 APPLICATION FOR ENROLLMENT – Coordinated Studies

DO NOT HAVE TO HAVE  
A JOB TO APPLY!

Please return signed application to Mrs. Crane Room 220

*Application must be returned by student to complete an interview.*

PLEASE PRINT in Black Ink ALL INFORMATION & READ CAREFULLY!					Date _____						
Name											
Last		First			Middle			Maiden			
Present Address											
Number		Street			City			State		Zip	
Social Security No. [   xxx - xx -   ]				Telephone (   )				Cell Phone (   )			
Age		Date of Birth [   -   -   ]									
Do you have a driver's license? <input type="checkbox"/> Yes <input type="checkbox"/> No    Do you have access to a car/other mode of transportation? <input type="checkbox"/> Yes <input type="checkbox"/> No											
Career and Technical Occupational Program Enrolled In (circle one) : Business    Family & Consumer Science    Health Science Welding    Engineering											
Career Objective: 1 <sup>st</sup> Choice _____ 2 <sup>nd</sup> Choice _____ 3 <sup>rd</sup> Choice _____											
Parent/Guardian Name(s)					Business or Cell Telephone (   )						
Parent/Guardian Address											
Number		Street			City			State		Zip	
Are you interested in summer employment? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time											
I understand that I MUST attend meeting on Mondays of each week. It is my responsibility to arrange with my employer a schedule that will allow students to attend meetings. Initials of Student _____											
I understand that there is a \$25 fee to participate in the Workbase Learning/Co-Op Program Initials of Student _____											
Do you intend to further your formal education after high school? <input type="checkbox"/> Yes <input type="checkbox"/> No											
Are you under a doctor's care? <input type="checkbox"/> Yes <input type="checkbox"/> No    Do you have any health problems that would interfere with your regular attendance on a job? <input type="checkbox"/> Yes <input type="checkbox"/> No    If yes, please explain _____											

### Previous Work Experience

*(List most recent position first/Does NOT have to be paid employment)*

Name of Employer/Organization	Type of Work	Employment Dates Current job FIRST

### Current Class Schedule

	Class	Teacher
1 <sup>st</sup> Block		
2 <sup>nd</sup> Block		
3 <sup>rd</sup> Block		
4 <sup>th</sup> Block		

**\*\*Student MUST have 1. Application and School Regulation Policy Sign by Parent Before Leaving Campus for Workbase Learning/Co Op**

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**List as references the names of three (3) teachers who can attest to the quality of your work.**

**One must be your current or previous Career Tech teacher.**

1. **Career and Technical Teacher:** (circle one) Crane Cunningham Munday Thames Greene Rudzinsky Beasley
2. \_\_\_\_\_
3. \_\_\_\_\_

To the Student:

Cooperative Education provides an opportunity to be considered for employment in business and industries in our area. When you enroll in Cooperative Education, you indicate that you are sincerely interested in putting forth your best efforts to receive work-based experience. If you accept this responsibility, please sign in the space provided.

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

To the Parent/Guardian:

Do you consent to your child entering Cooperative Education, providing transportation, and agree to cooperate with the school and the training agency in making the training and education of the greatest possible benefit to your child? If so, please indicate your support and approval with your signature.

Parent/Guardian Signature: \_\_\_\_\_ Date \_\_\_\_\_

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**To Be Completed By Cooperative Education Teacher-Coordinator**

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Current Attendance Record: No. Absences \_\_\_\_\_ No. Tardies \_\_\_\_\_

Current Disciplinary Record: Total Reports \_\_\_\_\_ Cumulative GPA: \_\_\_\_\_

List Career and Technical Occupational Courses that determine student's eligibility for participation:

Advanced Cooperative Education

(Concentrator: Two courses within a program that

1. \_\_\_\_\_
2. \_\_\_\_\_

Requirements:

\_\_\_ Transportation

\_\_\_ Class Fee \$25

\_\_\_ Member of a CTSO (FBLA, FCCLA, HOSA, TSA,  
Or SkillsUSA)

Verified By \_\_\_\_\_  
Counselor/School Administrator/Coop Coordinator

Status of Application:       Pending       Approved       Not Approved

**Saraland City School System  
Nondiscrimination Statement**

Saraland City School System does not discriminate on the basis of race, color, national origin, sex, disability, or age in its program and activities and provides equal access to the Boy Scouts and other designated youth groups.

**SARALAND HIGH SCHOOL**  
*WORKBASE LEARNING/COOPERATIVE EDUCATION*  
**SCHOOL REGULATIONS/POLICIES**

1. Student acknowledges that the primary purpose of work-based learning is educational and, therefore, agrees to abide by the Cooperative Education program policies and decisions of the teacher-coordinator, including those regarding specific job placements
2. Student acknowledges that the school, through the teacher-coordinator, is acting as an intermediary between employer and student and that the teacher-coordinator has a legitimate right to know and a significant role in determining the outcome of any employment issues including placement, termination, scheduling, assignments, and all other aspects of employment.
3. Cooperative Education students who fail to perform satisfactorily in all subject areas during any grading period and who fail to improve during the next grading period should be asked to resign from his/her job.
4. A student suspended from school should not be allowed to attend work during the suspension. On the second offense he/she may be dropped from the Cooperative Education program.
5. A student must comply with the LEA attendance policy to participate in the program.
6. A student losing his/her training station due to any action deemed unacceptable by the school and teacher/coordinator will be dropped from the program with possible loss of all credit.
7. A student whose job is terminated for any reason is to report to the teacher-coordinator immediately. Failure to do so may result in the student being dropped from the program.
8. A student not attending regular school classes and/or the Cooperative Education class cannot work at the training station on the day(s) he/she is absent.
9. In case of absence, the student is required to call the teacher-coordinator and his/her employer before class or working period.
10. Personal business handled on the job is prohibited.
11. Friends or family are not to visit the student on the job.
12. A student is to be on time at school as well as on the job.
13. Parents should understand the student's responsibility to the training station and not interfere with the performance of his/her duties.
14. Business rules for dress and personal hygiene will be observed.
15. Since training is the primary objective, a student is expected to remain with the training station to which he/she is assigned. Students may resign or change jobs only with the express written permission of the teacher-coordinator and following business practices for resignation. Students who fail to follow these procedures are subject to being dropped from Cooperative Education.
16. The student organization is an integral part of a student's Career and Technical Education program. Therefore, all students are expected to participate in and actively support the Career and Technical Education student organization that relates to their career objective.
17. When Cooperative Education students honor their employers with an employer-employee banquet, reception, etc., all students are expected to attend with their employers as their guests.
18. Students are placed on the job to train and are under the supervisions of both the teacher-coordinator and business supervisor/mentor where they are employed.
19. Students must abide by all school rules and regulations for other students and consider themselves under the jurisdiction of the school while in the training station.
20. Transportation to and from the training station is the responsibility of the student/parent/guardian. Transportation problems do not justify absence from work.
21. Students will leave the campus immediately following the last scheduled class. If for any reason a student needs to remain on campus, permission must be obtained from the teacher-coordinator.

I have read the foregoing rules for Cooperative Education students and agree to follow them to the best of my ability.

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

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