**Work Experience Agreement**

**Employee, Employer, Workforce Center**

This agreement is between the worksite employer, the work experience participant and the local Workforce Center and outlines the responsibilities of all parties in the operation and participation in a work experience opportunity offered by the Workforce Center.

Participant Name:

Participant Phone Number:

Employer:

Address:

Worksite Supervisor:

Alternative Supervisor:

Worksite Phone Number:

Workforce Representative:

Alternate WF Representative:

WF Rep. Phone Number:

Funded by which Program:

The goal of the work experience opportunity program is to:

1. Provide participants with positive experiences in the world of work
2. Increase the awareness of the educational and work skills requirements of a variety of jobs
3. Provide participants with the opportunity to explore potential career fields
4. Expose participant to learning new work skills and activities and provide a valuable work training opportunity for individuals lacking the employment experience
5. Allow employers and their workers the opportunity to positively influence our nation’s future workforce

All parties must sign off and agree to the following conditions:

**Work Experience Participant Agreement:**

I agree to and will be expected to perform the conditions outlined in this agreement:

* Develop an employment plan with a workforce representative, based on an evaluation of the educational and work-related goals. The employment plan should directly correlate with the provided work experience opportunity.
* Attend a participation orientation offered by the Workforce Center that describes and explains the expectations of the work experience opportunity.
* Put forth his/her best efforts to acquire all necessary skills and to fulfill all work requirements.
* Keep track of, respect and observe the policies, rules and work hours provided.
* Report the actual hours worked on the provided timesheet. (Overtime, holiday pay or sick time cannot be authorized or accrued)
* Attend all job interviews and/or workshops arranged by your workforce representative, even if scheduled during the time in which you are on the work experience site.
* Communicate with your supervisor and workforce representative regarding site progress, problems, tardiness, absences, or any time away from the work site.
* Notify your workforce representative immediately if there are concerns regarding the work experience placement. If there are problems that are unable to be worked out with the supervisor, contact the workforce center representative immediately.
* Secure reliable transportation to and from the worksite, including access to child care, when applicable.
* Immediately report any personal work accidents or injuries to the worksite supervisor and workforce center representative.
* Complete a work readiness evaluation before and after the work experience to determine competency levels upon completion.

**Worksite and Supervisor’s Agreement for Work Experience:**

I agree to and will be expected to perform the conditions outlined in this agreement:

* The designated individual/s who signs this contract is authorized to represent the worksite.
* Define and negotiate the work activities, work hours, timeframe and wages for the participant, based on the attached job description.
* Provide an alternate supervisor for the work experience participant to report to at all times when designated supervisor is not available.
* Attend a worksite orientation offered by the Workforce Center that describes and explains the expectations of the work experience opportunity.
* Read and review the Work Experience Employer Handbook.
* Provide the participant with an orientation to the rules, procedures and regulations of the worksite.
* Provide training and demonstrations on the work activities and proper use of any equipment utilized.
* Provide sufficient tasks (as defined within the attached job description) to occupy the participant during work hours.
* Review and provide feedback to the workforce representative on the progress and performance of the participant.
* Notify workforce representative of any problems or circumstances that could potentially lead to an early termination of the contract. In addition, provide notification of any intent to terminate this agreement earlier than what is outlined in this agreement.
* Sign off and verify that that participant actually worked the recorded hours on the timesheet.
* Assure that participants hired will not result in the displacement of employed workers or will not result in the substitution of regular workers who would normally be hired.
* Ensure that the participant maintains the designated work schedule, within the defined time frame. Participants are not allowed to accrue overtime, sick leave, or holiday pay.
* Provide a performance evaluation of the participant during and upon completion of the work experience, as defined within this agreement.
* Report any work accidents or injuries related to the participant to the workforce center representative.

**Workforce Representative Agreement for Work Experience:**

I agree to and will be expected to perform the conditions outlined in this agreement:

* Develop an employment plan with the participant, based on an evaluation of the educational and work-related goals. The employment plan should directly correlate with the provided work experience opportunity.
* Assess and identify any initial supportive services, educational needs, stipends and/or incentives anticipated throughout the work experience and incorporate those activities into the employment plan.
* Link academic and occupational learning as part of the menu of services for summer youth employment opportunities.
* Provide access to the 10 WIA program elements for youth, when applicable.
* Provide an alternate workforce representative for the work experience participant and worksite supervisor to report to at all times when designated representative is not available.
* Provide worksite and participant orientations for the worksite supervisor and work experience participant that describes and explains the expectations of the work experience opportunity.
* Assist worksite supervisor and participant in filling out any and all documentation needed.
* Negotiate the job duties, wages, timeframe and expectations of work experience opportunity.
* Maintain regular contact with the worksite supervisors and the participant, in order to provide necessary counseling and address the needs of all parties.
* Review the completed timesheets for accuracy and consistency for all authorized hours worked.
* Provide a payroll schedule to participant and worksite supervisor.
* The Workforce Center is responsible insuring that wages and workers’ compensation benefits are provided to the participant.
* Monitor and evaluate the worksite, work activities, and performance of participant and worksite to ensure that defined activities are completed, and that applicable labor laws are followed.
* Provide a pre and post-evaluation (and mid-term, when applicable) to determine the participant’s increased level of work readiness upon completion.
* Notify worksite supervisor and participant of any problems or circumstances that could potentially lead to an early termination of the contract. In addition, provide notification of any intent to terminate this agreement earlier than what is outlined in this agreement.

Provisions for Termination of the Agreement for Non-Performance or Failure to Meet Any of the Requirements of the Agreement

* Define circumstances that may result in termination of the agreement and process for corrective actions
* Define circumstances under which immediate termination of the agreement will occur
* Identify the notification of termination period

**Assurances and Certifications:**

* Comply with the regulations defined in the Fair Labor Standards Act, as well as any other pertinent federal, state, and local employment laws.
* Adhere to all regulations relating to anti-discrimination and equal opportunity. This includes discrimination based on a religious preference.
* Adhere to provisions related to the avoidance of sexual harassment
* Ensure the safety for all parties involved, as it relates to the work activities and the overall work experience opportunity.
* Program participants engaged in a paid work experience through WIA services should not unfavorably impact current employees from employment opportunities.
* Participants in a paid work experience must not be employed to carry out the construction, operation, or maintenance of any part of a facility that is intended for sectarian instruction or as a place for religious worship.
* All parties will monitor the accurate tracking of the participant’s actual hours worked.

An evaluation and monitoring of the actual worksite will be performed by a workforce representative on at least occasion(s) during the work experience. This will be performed to ensure the safety, appropriateness and performance of the worksite and participant.

**Position Details:**

Work Experience Job Title:

(Attach a complete job description to this contract)

Job Tasks that will be achieved or learned during the work experience:

Description of work activities and tasks to be performed % of time



Position Start Date:

Position End Date:

Hourly Pay Rate:

Anticipated Hours Per Week:

Anticipated Number of Hours Worked Daily -Work Schedule:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** | **Saturday** | **Sunday** |
|  |  |  |  |  |  |  |

**Agreement Signatures:**

I agree with the information provided within this agreement and will comply with all requirements.

\_\_\_

Print Worksite Supervisor’s Name Signature Date

\_\_\_

Print Participant’s Name Signature Date

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Print Workforce Representative’s Name Signature Date

**TIME SHEET SIGNATURE CARD**

Worksite (business/employer) Name

Worksite Street Address

Worksite City, State, Zip Code

The supervisor or designee is responsible for reviewing the timesheet to ensure accuracy in recording total hours work, along with providing information on progress.

Supervisor Name (Print or Type)

Supervisor Signature Date

Supervisor Designee Name (Print or Type)

Designee Signature Date