

*The Cascade Academy
Foundation Internship
Experience*

Employer Guidelines





Dear Business Partners:

Thank you, for giving our young people an internship experience. This experience is invaluable as it allows the student to apply the skills and curriculum learned in the classroom to real world business situations. Your support and involvement in the program helps to ensure that our students are academically prepared while giving some on-the-job experience where they can apply what they are learning and experience the daily routine of going to work.

With the support of business partners like you, programs like this one will continue to grow and flourish and benefit the youth it serves. I again thank you for going above and beyond by offering a real world experience to our students.

Thank you,

A handwritten signature in black ink that reads 'Chuck Garner'.

Chuck Garner
Cascade Academy Foundation Board Chairman
Oregonians Credit Union
6915 SE Lake Rd.
Milwaukie, OR 97267
503-239-5336

FREQUENTLY ASKED QUESTIONS...

- A. **Are the students compensated for their work?** Yes. There are multiple ways for students to be compensated. One is earning school credit. Another is the intern could be hired and an employer sets an hourly rate (a minimum of Oregon's minimum wage) to pay the student. And third, an intern may be paid a one-time fellowship (stipend). The employer host may choose to pay a tax-deductible fellowship or donation. Fourth, a fellowship may be available through CAF grants and donations.
- B. **Who would I contact if I have questions regarding the student or internship?** A school supervisor will be assigned to each student and contact information will be provided to you in your employer internship packet. Please contact the school supervisor if you have any questions.
- C. **What can I do if a student does not behave in a manner that shows interest or maturity?** First, talk to the student and review the type of behavior necessary for the job. If the behavior does not change, call the school representative.
- D. **Who pays the costs of Worker' Compensation insurance?** Workman's compensation insurance is paid for all students participating in internship activities.
- E. **Confidentiality is extremely important in my business. How can I be assured students will understand?** Since confidentiality is critical in many occupations, the student's orientation should include discussions of maintaining confidentiality
- F. **How will I know what to do once students are here?** School representatives will work with you and provide materials to help guide you in your planning. An employer internship training session is available to help walk you through expectations and answer any questions you might have.
- G. **Can I terminate a student if he or she is not meeting satisfactory standards?** Yes. Students are expected to abide by employer rules and regulations. However, prior to termination, please contact the school representative to discuss the concerns. The school representative may be able to intervene and help the student to correct the situation.

If you wish to contact the supervising adult for your intern, please contact Tracey Williams at the below number or e-mail. To learn more about CAF and its mission please see our web site at: www.cascadeacademyfoundation.org

School Contact Information

Tracey Williams, Career & Guidance Coordinator
Reynolds High School
Cell (503) 502-0483
tracey_williams@reynolds.k12.or.us

Justin Birmingham
Justin_Birmingham@reynolds.k12.or.us
Cell: 503-577-3258
Lauren Smith
Lauren_Smith@reynolds.k12.or.us
Cell: 503-887-5728



Ways in which you can help support CAF

- **The Cascade Academy Foundation is a 501 3C non-profit organization which is made up of educators as well as companies who choose to be part of this board. With the help of our board members as well as businesses like yourself, financial donations are sought after to help support this program and its endeavors. These donations are the back bone of this organization. It allows for transportation needs, clothing, a one-time stipend and program events.**
- **The Cascade Academy Foundation is always open to welcoming new community business members who wish to help support this board and their mission. By attending monthly meetings or by just volunteering your time in fund raising events.**
- **By sponsoring a youth in an internship experience, as student is allowed to see the connections between what they learn in school and the larger world. This experience prepares students to enter the workforce by combining academic studies with practical on-the-job-work experience.**

If you wish to learn more about how you can help by volunteering or giving a donation, you can contact Tracey Williams @ Reynolds High School. To learn more about CAF and its mission please see our web site at: www.cascadeacademyfoundation.org

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Employer Supervision Guidelines

Once an intern has been placed at an employer location for the internship period, the employer supervisor and the school supervisor will work together to make sure the intern is having an appropriate educational experience, and also stays productive. The following guidelines will ensure the necessary paperwork will be filled out by the employer prior to the internship starting and following the internship experience in order for the student to successfully complete their CAF Internship experience.

Please take a few moments to meet with each student to go over the following documents. They have already been briefed on how and when to complete each of the documents below:

1. The ***“RHS Internship Agreement and Permission Form”*** (pgs.8-10) will be completed by the student and yourself (pg. 9 only). **Upon receipt of this packet, please read through the Agreement, sign the “Employer” portion (pg. 9 only) and fax it to me at Reynolds High School.**

Att: Tracey Williams
Career Center, Reynolds High School
Fax #: 503-667-3096

The student and their parent will have already completed their portion of the agreement and turned it in to me.

2. It is very important the student keep in contact with their school supervisor and contact them by e-mail or phone at least 3 times throughout this experience. **The student should also e-mail or call whenever needed.**
 - a. **E-mail supervisor during first week to update on internship progress**
 - b. **E-mail supervisor toward end of internship to confirm end date and update progress of internship**
 - c. **E-mail/call supervisor after internship to confirm completion and delivery of all documents no later than 2 weeks following the end of the internship experience.**
3. Please encourage student to record their activities in their ***“Daily Journal”*** (included in employer and student internship packet).
4. Your daily initial and final signature will be required to verify the student’s work hours on their ***“Time Report”*** (included in employer and student internship packet). Reminder: 80 hours min. required for each student.
5. At the end of the internship please complete an evaluation on the intern called the ***“RHS Career-Related Learning Plan Evaluation”*** (included in employer and student internship packet), sign and return it to the student. The student will also complete their portion of this evaluation.
6. Included in these guidelines is a handout that contains ***“Best Practice for Your Student Intern”***, as well as ***“Performance Objectives”***, to give you ideas for a student work plan.

Employer Supervision Guidelines (Page 2)

7. Included in the employer and student's packet is the "*Guidelines for Reflection on Internships*" (for students to use as they write their reflection) and the "*End of Internship Checklist for Students*" (to help them organize all internship documents to turn in to their supervisor).

Both of these documents are to be completed by the student toward the end of their internship experience. The student will then utilize the "*End of Internship Checklist*" to guide them in organizing their internship documents into a folder that will include all of the above documents.

Within 2 weeks of completion of the internship the student will provide both the employer and the school supervisor a copy of their reflection essay. At the same time the student will turn their completed internship documents in a folder to their school supervisor.

*Please feel free to contact the student's school supervisor by e-mail or phone if you have any questions at anytime during the internship. ******(note: during the summer please use cell number).*

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BEST PRACTICES FOR YOUR STUDENT INTERN

1. Assign interns **projects, problem solving activities, presentations, research development.**
2. **Informational Interviews:** Allow each intern to go on at least 2 informational interviews with the personnel throughout the company. This allows the intern an opportunity to network, learn more about the company and enhance communication skills.
3. **Presentations:** At the end of the summer, have the intern give a presentation at the staff meeting or present in front of a group of staff members. This gives the intern the opportunity to practice presentation skills.
4. **Job Shadowing/Cross Training:** Let the intern work in other departments if the departments have work available or special projects they need assistance with. This keeps the intern busy and creates a sense of accomplishments.
5. **Incorporate intern with regular staff:** Invite the intern to attend staff meetings and trainings when applicable. Invite them to company sponsored activities i.e. picnics, ballgames, etc. This instills a sense of value for the intern.
6. **Intern networking events:** Let the intern network with other interns within the company by sponsoring a breakfast or lunch. This creates a comfortable environment and allows them to relate to people with the same interest.

PERFORMANCE OBJECTIVES

By the end of the Academy Internship experience the student should be able to:

- Explain the major purposes of your firm
- Describe your responsibilities
- Know and report where information comes from and goes to
- Explain the importance of your assignment
- Report the supervisor's name, title and telephone number
- Explain the importance of the department or area where you work as it relates to other departments and the company
- Explain how the company earns profits
- Explain how your company is special or different from other similar company's
- Describe the major activities and areas of operation of your company
- Report of the historical background of the company
- Identify the president and key personnel at your company
- Describe job opportunities and educational requirements of positions in your career area

****EMPLOYERS: The remaining pages are copies of the documents inside the student interns Internship Guideline Packet. Some documents may require your completion.**

Cascade Academy Foundation Internship Agreement & Permission Form

Student Name: _____ **(Please Print)** **Grade:** _____

The STUDENT agrees to:

1. Keep regular attendance, both in school and on the job, notify the school and supervisor if unable to report to work. Student cannot work on any school day that he/she fails to attend school without the signed consent of school representative. Participating students who fail to regularly attend and make satisfactory progress in school courses and required related training may be removed from the internship program.
2. Demonstrate honesty, punctuality, courtesy, a cooperative attitude, proper health and grooming habits, appropriate dress and willingness to learn.
3. Inform the Supervisor and School Representative about any difficulties arising at the training site.
4. Conform to the rules and regulations of the Supervisor and participating business or school.
5. Furnish the School Representative with all necessary information, complete all necessary reports.
6. Comply with school policies.
7. RHS Internships are provided to students who **maintain minimum academic standards, including attendance at school** and STW activities.

I realize that failure to comply with all rules and regulations associated with the CAF Internship Program may result in my removal from the program.

Student's Signature: _____ Date: _____

The PARENT agrees to:

1. Give my consent for _____ to participate in the CAF Internship program, understanding that the student will maintain a C or better status in all classes as well as consistent attendance.
2. Encourage the student to effectively carry out duties and responsibilities.
3. Guarantee that the student is covered by adequate insurance related to travel to and from the school site.
4. (Print Name) _____ hereby agree to release, hold harmless, indemnify and defend Reynolds School District and its employees, officers, board of directors, agents and assigns (hereinafter RDS) from any and all liability for personal injury, death, property damage and loss of use of property including, but not limited to claims that may occur before, during or after the attendance of my child or ward at Internship activities, whether due, in whole or in part, to the negligence of Internship program or any other theory of liability against it, or any other cause. I understand that there are inherent and other risks involved in travel to and from and attendance in Internship activities. I freely and voluntarily accept these risks for my child or ward and all other risks associated with travel to, and attendance at, Internship activities. I also understand and agree that RSD is not responsible for the time or manner which my child or ward may arrive or leave Internship activities.

I have read and understand this general consent release and indemnity agreement and accept its terms and conditions.

Parents of Student Signature: _____ Date: _____

Reynolds High School Internship Agreement & Permission Form (Page 2)

The EMPLOYER agrees to:

1. Adhere to all federal and state regulations regarding employment, internships, insurance, safety, follow child labor laws, minimum wages, discrimination and other applicable regulations.
2. If student is hired by the employer, workman's compensation insurance will be provided by said employer.
3. Agrees to provide the student with competent supervision at all times, and assist the student in achieving necessary skills and knowledge.
4. Promptly notify the School Representative about students having any difficulties arising at the worksite or absenteeism.
5. Provide continuing and final evaluations for the teacher intern and allow reasonable time for consultation with the school representative.
6. Certifies that an adult employee is not being displaced by hiring a student in a work-based learning program.
7. Agrees to complete student evaluations (attached).
8. Allow on-site monitoring of student by school staff.

Supervisor (or Employer) Signature: _____ Date: _____

The SCHOOL DISTRICT agrees to:

1. Provide a School Representative to work with the student to facilitate the student's successful completion of the program and to ensure close coordination between academic instruction, work-based learning, and related training.
2. Will provide supportive curriculum or assist in fulfilling related training.
3. Assist employer in resolving any problems relating to the Internship.
4. Grant academic credit toward a high school diploma upon satisfactory performance in CAF Internship program.
5. If appropriate, monitor and record student's progress.
6. Provide workman's compensation insurance for all students participating in RHS CAF internship activities.

RHS Representative's Signature: _____ Date: _____

STUDENT PHOTO/VIDEO RELEASE FORM

In connection with the Internship Experience at RHS, this program may take photographs, for use in publications, videotapes, and other materials to promote the school-to-work program, and to inform interested parties about such activities.

Parent (or legal guardian) of the below-named student consents to the use of the student's likeness and/or voice in such publications, videotapes, and other materials and releases and discharges Reynolds High School, its agents and consultants, directors, employees, and officers from all claims for loss, damage, injury, or expense arising from such use.

Student Name: _____

School: _____

Signature of Parent or Guardian: _____

Reynolds High School Career Center
Tracey Williams, Career Guidance Coordinator, CAF Board Secretary
1698 SW Cherry Park Rd.
Troutdale, OR 97060

Cell (Summer): 503-502-0483 Work (school year): 503-667-3186, ext. 1075

Tracey_williams@reynolds.k12.or.us

**Reynolds High School
Transportation and Release Form**

Name of Student: _____

Age: _____ Phone: _____

Address: _____

City, State, Zip: _____

School Activity or Athletic Event: _____

During the course of the school year, your child may be involved in various school-related activities and athletic events sponsored by Reynolds High School. The District has elected to establish guidelines relating to transportation of students for these events. There will be some activities that the District will not be providing transportation to and from the event or activity. For those events/activities, your child will be responsible for their own transportation. This form is intended to advise parents and guardians of legal rights and duties and to release the District from all liabilities arising out of students transporting themselves in privately owned vehicles.

I acknowledge that I have reviewed the following procedures:

- a) There may be times/occurrences in which my child will be transported in a privately owned vehicle.
- b) There may be times/occurrences in which my child will be transported in a vehicle driven by another adult or student
- c) I further agree to release and to indemnify and hold-harmless the School District, employees, school board members, volunteers, from any claims and liabilities (including costs and attorney fees) arising out of or in any way connected to the transportation of my child/guardian in personally owned vehicles either owned by me or any other party. This release and Indemnity agreement does not apply to gross negligence on the part of the District or its employees.
- d) I understand that I am responsible for damage to my own automobile.

Signature of Parent or Guardian: _____

Today's Date: _____

Daily Journal

Monday

Date: _____

Tuesday

Date: _____

Wednesday

Date: _____

Thursday

Date: _____

Friday

Date: _____

Reynolds High School

Work-Based Experience
Career-Related Learning Plan Evaluation

Student Name _____ Supervisor _____
 Student Phone # _____ Employer/Company _____
 Instructor _____ Start Date _____

Evaluation: Ratings are assigned and jointly reviewed by the student and the supervisor of the experience. Evaluations are also reviewed with the instructor and may be shared with the student's parents or guardians.
 4= Exceeds expectations in performing this task/skill.
 3= Can perform this task/skill satisfactorily without supervision.
 2= Can perform this task/skill satisfactorily with supervision; needs additional work.
 1= Cannot perform this task/skill satisfactorily.
 NA= Not observed or not applicable at this time.

Tasks/Skills	Evaluation	
	Student	Advisor
CAREER RELATED LEARNING STANDARDS		
Personal Management: Exhibit appropriate work ethic and behaviors in school, community, and/or workplace.		
1. Complete tasks on time and meet established standards of quality.		
2. Maintain regular, on-time attendance.		
3. Interact appropriately with others.		
Problem Solving: Apply decision-making and problem-solving techniques in school, community, and/or workplace.		
1. Accurately identify a problem.		
2. Locate information that leads to a solution to the problem.		
3. Develop and carry out a plan to solve the problem.		
Communication: Demonstrate effective communications skills to give and receive information in school, community, and/or workplace.		
1. Communicate clearly, accurately, and appropriately to other students and adults.		
2. Read and used technical and instructional materials for information and to carry out a task.		
3. Listen carefully and summarize key ideas.		
4. Give and receive feedback in a positive manner.		
Teamwork: Demonstrate effective teamwork in school, community, and/or workplace.		

Tasks/Skills	Evaluation	
	Student	Advisor
1. Identify and assume roles within a team.		
2. Work productively with others (e.g., negotiate, compromise, build consensus, share decision making, set goals, manage conflict).		
Employment Foundations: Demonstrate academic, technical, and organizational knowledge and skills required for successful employment.		
1. Use and maintain appropriate tools and technologies for a task.		
2. Follow safety, regulatory, and/or ethical practices in a work environment.		
3. Demonstrate appearance and hygiene appropriate to a workplace.		
Career Development: Demonstrate career development skills in planning for post-high school experiences.		
1. Assess your personal knowledge and skills related to your education and career goals.		
2. Plan for life after high school (e.g., research career and educational options, develop a plan to achieve goals).		
3. Review your education and career goals to determine if they should change.		
4. Use job-seeking skills (e.g., write resumes, complete applications, participate in interviews).		

Supervisor Comments:

Student Comments:

Supervisor signature: _____

Student signature: _____

Guidelines for Internship Reflection

Every RHS intern must submit a written reflection on his/her internship experience. Three copies of the reflection are needed. This internship reflection is an important program requirement and should be of the quality in which you expect to receive a grade for. The quality of the essay will also be valuable in assisting students in qualifying for honors, awards, and scholarships grants at graduation.

Due Date: Submit one copy of the reflection to me within two weeks of the end of your 2-week internship. One copy of the reflection will also be submitted to your employer prior to leaving the internship and you will keep a copy for yourself to satisfy career related learning standards for graduation.

Format: 1 page, typed, 8 ½ x 11 good quality paper, double-spaced, adequate margins, MLA format. Must include your name, school, date of report, and name of internship company.

Content:

1. **Description:** Name of CEO, brief history of firm, nature of business
2. **Basic Internship Date:** Employment dates, name address, and telephone number of supervisor(s), your pay during the summer (if applicable).
3. **Description and Evaluation of Internship:** Cite specific examples in answering these questions (in any order you deem appropriate).
 - What were your responsibilities?
 - How responsive and helpful were your supervisors?
 - Did you find your co-workers accepting and cooperative?
 - What did you learn on the job?
 - Describe how you demonstrated responsibility and self-management in your internship.
 - Describe how teamwork is evident at the job site.
 - Describe the importance of working with people from diverse backgrounds.
 - Were you able to apply skills and knowledge learned in Academy courses in school to your internship experience?
 - To what extent did your internship affect your plans for a career in this industry or otherwise?
 - How would you rate the overall experience?
 - What problems, if any, did you encounter? How did you handle these problems?

Proofreading: Be sure to proofread your reflection for spelling, grammar, and typographical errors before handing it in. Your paper will be evaluated for both content and usage.

Questions: Call Mrs. Williams during the summer on her cell at 503-502-0483 or at School (during the school year) at 503-667-3186 Ext. 1075 or or e-mail at: Tracey.Williams@reynolds.k12.or.us

End of Internship Checklist for Students

Turn in the following items with your written report. You may bind the items in whatever way you see fit but evaluation can be completed more quickly if you put the items in the order listed below.

Check when done	Items you must include:	Advisor Evaluation:		
		Missing	Needs Revision	Completed
	Internship Checklist (This pages itself)			
	Reflection (can be sent electronically)			
	Time Report—completed and signed by employer			
	RHS WBE Career-Related Learning Plan Evaluation			
	Copy of the thank you note you sent/gave to your supervisor (can be sent electronically)			
	Worksite supervisor's business cards			
	Picture of you, your supervisor and workplace (can be sent electronically)			

Check if included	Items you may also include:	Advisor Comments:
	A letter of recommendation written by your employer	
	Miscellaneous documents shared with you by employer	

Please take a few moments to provide feedback for CAF and write overall comments regarding your internship experience below:
