

JOB SHADOW REQUEST FORM

STUDENT'S NAME _____ GRADE _____

ORGANIZATION VISITED _____

GUIDELINES:

1. The attendance secretary, your guidance counselor and all teachers must sign a job shadow form one week (or more) prior to the departure date.
2. Assignments will be furnished upon return (or in advance if the teacher is able). Students will have one day per day absent to complete and turn in assignments up to four days.
3. STUDENT MUST VERIFY THE VISIT UPON RETURN WITH A LETTER FROM THE ORGANIZATION VISITED WITHIN 2 SCHOOL DAYS.
4. Students will conclude their job shadow experience by writing a reflection on their experience. Reflections should be at least a paragraph in length and must be approved by your guidance counselor.
5. All job shadow days will be excused unless the above rules are not followed.
6. Return request form signed by teacher, parent(s) and student to attendance office.

Date of visit: _____

Teacher's signature acknowledging the dates of absentee:

Period 1 _____

Period 5 _____

Period 2 _____

Period 6 _____

Period 3 _____

Period 7 _____

Period 4 _____

Date form is completed/returned: _____

Student's signature: _____ Parents' signature: _____

Attendance Secretary _____

Counselor signature _____ Approved _____ Denied _____
