

**SANTA CLARA COUNTY REGIONAL OCCUPATIONAL PROGRAM
COOPERATIVE VOCATIONAL EDUCATION (CVE) TRAINING AGREEMENT**

STUDENT NAME _____ DATE _____

COURSE TITLE _____ USOE CODE _____

Cooperative Vocational Education (CVE) is an instructional program of Santa Clara County Regional Occupational Program - South available to qualified full-time students who are at least 16 years of age. CVE correlates formal vocational classroom instruction with regularly scheduled, paid, on-the-job learning experiences. CVE assists students to develop and refine occupational competencies (attitudes, skills, and knowledge) needed for entry-level employment or advanced training.

The Educational Code of the State of California requires that students enrolled in Cooperative Vocational Education be covered by a training agreement that is signed by the parties involved. Responsibilities of the parties are detailed below:

TRAINEE RESPONSIBILITIES

As a student in the Cooperative Vocational Education Program (CVE-ROP), I agree to:

1. Follow the program rules and regulations established by the instructor and employer.
2. Obtain a Social Security card and a work permit.
3. Complete all required paperwork including written verification of hours spent in on-the-job training.
4. Maintain regular attendance and punctuality in my school and on-the-job training.
5. Notify the school and employer if I am unable to report to my worksite.
6. Notify my instructor immediately if I am released from my employment.
7. Consult with my instructor regarding any plans to quit my employment.

STUDENT SIGNATURE _____ DATE _____

PARENT/GUARDIAN RESPONSIBILITIES

As a parent/guardian of a student in the Cooperative Education Program (CVE), I agree to:

1. Encourage the student to effectively carry out the duties and responsibilities of the program at Santa Clara County ROP and at the training site.
2. Arrange transportation and accept responsibility for the safety and conduct of the trainee while he/she is traveling to and from the school, the training site and home.

PARENT/GUARDIAN'S SIGNATURE _____

PRINTED NAME _____

ADDRESS _____

Street	City	State	ZIP
EMERGENCY PHONE _____	HOME PHONE _____		

WORK PHONE _____ CELL PHONE _____

COOPERATIVE VOCATIONAL EDUCATION

EMPLOYER RESPONSIBILITIES

As a training site sponsor in the Cooperative Vocational Education Program (CVE), I agree to:

1. Inform the student of the rules, regulations and duties expected of him/her on the job.
2. Supervise the student trainee and assist in improving his/her performance.
3. Provide Workmen’s Compensation coverage for the student and abide by all State and Federal laws pertaining to employment of the student.
4. Verify the hours the student works by signing the student’s timecards.
5. Confer with the instructor regarding the student’s training progress and complete the written evaluation forms that will be provided.
6. Inform the instructor if planning to terminate a student’s employment.
7. Have a current work permit on file for all students under the age of 18.
8. Offer employment without regard to race, color, creed, age, national origin, sex or handicap.

JOB TITLE _____

STARTING DATE _____ WAGE PER HOUR _____

FIRM NAME _____ PHONE _____

FIRM ADDRESS _____

Street City State ZIP

EMPLOYER’S SIGNATURE/TITLE _____

ROP RESPONSIBILITIES

As the coordinator of ROP, I agree to:

1. Instruct all ROP teachers in the rules and regulations of cooperative vocational education and provide them with all necessary forms.

ROP COORDINATOR SIGNATURE _____

INSTRUCTOR RESPONSIBILITIES

As the instructor in the Cooperative Educational Program (CVE), I agree to:

1. Inform the students, parents, and employer of the objectives of CVE and ensure that all parties complete the required paperwork.
2. Work with the employer to provide the student with the maximum educational benefit and to resolve any work-related problems.
3. Visit the training site to observe the student and consult with the employer.
4. Provide instruction and correlate the job-related classroom instruction with the work site learning experience.
5. Assign the trainee a grade and credits based on work site evaluations.

INSTRUCTOR’S SIGNATURE: _____

Santa Clara County Regional Occupational Program - South
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