

WORK EXPERIENCE EDUCATION (WRKX) LEARNING AGREEMENT

Student Name: _____ Student ID#: _____ Course Section#: _____
 Student Phone#: _____ Student Email: _____
 Worksite Name: _____ Worksite Address: _____
 Supervisor Name: _____ Supervisor Email: _____ Supervisor Phone#: _____

New learning objectives are required each term that a student is enrolled in WRKX (54 working hours = 1 unit = 1 objective). Learning objectives reflecting new or expanded job-related responsibilities must be written by the student and approved by the supervisor and instructor at the beginning of the term. The objective(s) must in some way align with the student's career goal or major, be substantive, measurable, and attainable. *Be creative*. There are many skills to be learned or improved even if the work experience is not exactly within the major. The supervisor will meet with the instructor at least once during the term to evaluate the student's performance on their learning objectives, and the Instructor will award academic credit for successful completion of the program requirements

STUDENT LEARNING AGREEMENT (STUDENT/EMPLOYMENT SUPERVISOR COMPLETE)		Supervisor Score Out of 100
1	By the end of the term, I will learn and/or improve:	
2	By the end of the term, I will learn and/or improve:	
3	By the end of the term, I will learn and/or improve:	
4	By the end of the term, I will learn and/or improve:	

Supervisor Signature: _____ Date: _____
 Student Signature: _____ Date: _____
 Instructor Signature: _____ Date: _____

END-OF-TERM EVALUATION – INSTRUCTOR USE ONLY

Course Units: ____ Final Grade: ____ Paid: ____ Unpaid: ____ Course Hours Total: ____

Contact with Supervisor: 1st Contact Date: _____ 2nd Second Contact Date: _____
Visitation of worksite by instructor: Yes No Date: _____
Consultation(s) with Student: Yes No Date: _____

Final Supervisor Signature: _____ **Date:** _____ **Average Hrs. Weekly:** _____
Final Instructor Signature: _____ **Date:** _____