



Work Experience Credit Application

Name _____ date _____

Grade _____ Crew Leader _____

School email _____ personal email _____

School year _____

Place of employment _____

Supervisor's Name _____ phone number _____

Email address _____ street address _____

Your position title _____ Hours worked per week _____

Work Experience Occurs: _____ outside school day OR _____ during the school day

Please describe the work you do and the job responsibilities expected of you. Identify what you think you are going to learn on the job.

Student Signature _____ Parent Signature _____

Principal Signature _____