

Career Bridge Program – Expectations and Internship Eligibility

Overview

The Career Bridge program will prepare students to pursue alternative post-secondary pathways: apprenticeship programs, the military, full-time employment, and workforce development programs. Students will be eligible for a paid spring school year internship, for 10 hours per week from March – April 2019, if they successfully meet the expectations below. Students will also receive a bonus for completing key milestones, such as: resume, mock interview, and post-secondary applications.



Expectations of Students

- Students opt-in to the program by completing opt-in form online: bit.ly/CareerBridge2019
- Parents/guardians sign and complete paper consent form along with students
- Students attend Career Prep sessions at the school site 1-2x a month from October 2018 to February 2019.
- Career Prep sessions (during the school day) cover skills such as resume development, interview prep, professional communication, and professional dress.
 - Students will be informed of the dates and times at the Career Bridge Kick-off in October 2018.
 - Students must notify the College and Career Coordinator in the event of an absence and schedule time to make up material missed.
- Students attend at least 2 off-site career exposure events (i.e., apprenticeship, hospitality, IT).
- Students must meet the following milestones to be eligible for a paid internship interview: completed resume, mock interview, completed internship application.

Career Bridge Retention

- A student will be put on probation from the Career Bridge program if:
 - A student fails 1-2 core classes during an individual quarter
 - A student misses a scheduled Career Prep session due to an unexcused absence without notifying the College and Career Coordinator (see chart below)
- Students will create a probation plan with their College and Career Coordinator to identify steps they will take to improve behavior to remain eligible in the program.

| Excused Absences | Unexcused Absences |
|---|--|
| - Student illness or medical reasons such as appointment - Death in the student’s immediate family - Lawful suspension or exclusion from school by school authorities - Cannot be excused from class for the session due to a required assessment - Emergency or other circumstances approved by the College & Career Coordinator - See DCPS Attendance Policy for more details | Babysitting Doing errands Extended travel Oversleeping Cutting classes |

Dismissal from the Career Bridge Program

| Action | Result |
|--|---|
| A student misses two consecutive cohort sessions with an unexcused absence and does not notify | The student will be dismissed from the Career Bridge program |
| A student fails 3+ classes at the end of quarter 1 | The student can continue to attend the Career Prep sessions but will be ineligible for an internship if they are NOT on-track to graduate |
| A student fails 1-2 core classes for two quarters, to be evaluated at the end of quarter two and three | The student can continue to attend the Career Prep sessions but will be ineligible for an internship if they are NOT on-track to graduate |

DCPS Career Bridge Program

CONSENT AND WAIVER FOR DCPS CAREER BRIDGE PROGRAM PARTICIPATION

STUDENT INFORMATION: _____
FULL NAME AS IT APPEARS ON BIRTH CERTIFICATE DATE OF BIRTH

_____ HIGH SCHOOL _____ GRADE 2017-2018 SCHOOL YEAR

RESIDENCE: _____
STREET ADDRESS

PHONE #1 (HOME/WORK/CELL): _____ PHONE #2 (HOME/WORK/CELL): _____

PARENT/LEGAL GUARDIAN NAME:

Prior to participation in the Career Bridge Program, the parents/guardians of students and the student, are required to sign this form.

STUDENT PARTICIPATION - STUDENT AGREEMENT

By signing this form, you, the student, agree to meet the expectation expectations outlined above during your participation in the Career Bridge program. You, the student, recognize that you must meet these expectations in order to remain eligible for the internship and remain in the program. You, the student, also accept the reasons by which you, the student, may be dismissed from the program.

Therefore, I hereby acknowledge that **I have read and understood** the statement above, AND, agree to abide by the expectations of the Career Bridge program to remain eligible for the spring internship.

SIGNATURE of Student

DATE

PRINTED NAME of Student

STUDENT PARTICIPATION - PARENT/GUARDIAN CONSENT

By signing this form, you, the parent/guardian, agree to support your student in meeting the student expectations outlined above during their participation in the Career Bridge program. You, the parent/guardian, recognize that your student must meet these expectations in order to remain eligible for the internship and remain in the program. You also accept the reasons by which a student may be dismissed from the program.

Additionally, participation in job training and on-the-job internship activities as part of the Career Bridge Program may involve being assigned to work environments that, despite the exercise of due care, may result in severe injury, including paralysis or death. Participants in the Career Bridge Program will complete all job training and on-the-job internship activities under the supervision and guidance of specially trained adult professionals working in their fields of expertise. However, it is impossible to eliminate all risks inherent in job training and on-the-job internship activities in certain work environments.

By signing this form, you agree to waive all claims against the District of Columbia, DC Public Schools and its employees and volunteers, and the partner organizations of DC Public Schools and their employees and volunteers for any injury, accident, or illness occurring during or by reason of your student's participation in the Career Bridge Program. You accept the complete and sole responsibility to inform DCPS Staff, in writing of any future revocation of this consent to participate and waiver. Absent a revocation, this consent to participate and waiver will remain valid for one calendar year following the date it is signed.

Therefore, I hereby acknowledge that I have read and understood the statement above, AND

I hereby agree to support my student's participation in the program and give my consent for my student named above to participate in ALL ACTIVITIES offered as part of the DCPS Career Bridge Program, including all in-town and out-of-town travel.

SIGNATURE of **(Circle one)** Parent / Legal Guardian

DATE

PRINTED NAME of **(Circle one)** Parent / Legal Guardian

() I am/my child is covered by Medical Insurance or () I am not/my child is not covered by Medical Insurance