



Application for Work-Study (BCE and DCT) Programs Spruce Creek High School



_____ Name _____ Alpha Code

_____ Home Address _____ City _____ ZIP

_____ Current Grade Level _____ Home Phone _____ Cell Phone

Mode of transportation too work if accepted for BCE/DCT: _____ Own vehicle _____ Parent's car _____ Other

Are your working now? _____ If so, where? _____

Position/Duties? _____ How long? _____ Do you intend to stay there? _____

All Work/study programs must provide Workman's Compensation Insurance. Does your place of work provide it? _____

Special skills/Interest for job (computer efficiency, child care, retail, food service, patient care, etc.)

If not employed and looking for work, places you have applied recently: _____

_____ Current GPA _____ Cumulative GPA _____ Guidance Signature

_____ Number of absences this year (**attach print-out**) _____ Health issues (please specify)

_____ Number of discipline referrals this year guidance initials _____ Number of Suspensions guidance initials

Please list required courses that you must take next school year: _____

Future career goals: _____

Hobbies, interests, clubs: _____

Dues (\$15 per semester) are required. The dues will assist in paying for t-shirts, special activities, and the end of the year employer appreciation breakfast.

Statement of Responsibility

Parents: I agree to follow the policy and procedures of the work-study program and will do my part in assisting my son/daughter to fulfill obligations to the program including regularity of attendance and maintaining a satisfactory scholastic standing. I realize that my child will be leaving school campus before the end of the regular school day to report to his/her place of employment for job training. I shall urge my child to exercise extreme caution in getting to work. I will not hold the teacher, SCHS, or the school board responsible for any accident, should it occur, that might involve my child on his/her way to work.

Student: I have discussed the program with my parent(s) and agree to follow the policy and procedures of the work-study program.

_____ Student Signature _____ Parent Signature _____ Date

- ✓ Please attach a printout of your attendance report. (You may get it from the Attendance Office).
- ✓ Print your current schedule on the lines provided on the back of this form.
- ✓ We would like to have a photograph of you attached to your completed application, so that we may put a name with a face as we become familiar with potential work-study students.

Print your current schedule on the lines provided:

Subject:

Teacher

Room

1st _____

2nd _____

3rd _____

4th _____

5th _____

6th _____

7th _____
