Job Shadow
Student Packet

Crook County High School
JOB SHADOW
Overview

A job shadow provides students the opportunity to visit a business, non-profit or government agency to learn first hand what employees experience day to day in their careers. Students will observe activities, ask prepared questions and gain a better understanding of what employees and employers do on a daily basis.

What will I do at my Job Shadow?
Your goal will be to learn as much as possible by observing, listening, asking questions, and taking good notes. You will "shadow" a person or maybe many different people, and observe what they do throughout their job duties. At the job shadow, you will ask the interview questions included in this packet. If the person you are shadowing is extremely busy and there is absolutely no time to cover all your questions, ask if you may call them at a specific time to complete the questions. Always be respectful of the person you are shadowing.

You must complete ALL of the following to receive credit for your Job Shadow.

BEFORE your Job Shadow:
✓ Review this entire packet
✓ Complete the Career Interest Form
✓ Obtain Job Shadow Approval from Student Connections Teacher
✓ Set up Job Shadow Date and Time
✓ Complete and return Parent/Guardian Authorization & Release form
✓ Complete and return Student Contract & Teacher Consent form
✓ Confirm your Job Shadow appointment with your host
✓ Deliver the Job Shadow Overview letter to your host no less than two days prior to your job shadow

DURING your Job Shadow:
✓ Follow Job Shadow etiquette
✓ Answer all questions on the Employer Interview page
✓ Write examples of how your host uses each skill listed on the Observation page
✓ Ask the employer to fill out the Host/Employer Evaluation

AFTER your Job Shadow:
✓ Complete the Reflection Paper
✓ Type and send Thank-you Letter (copy to Student Connections Teacher)

Notes: Job Shadows are a minimum of three hours in length. To be eligible for credit your job shadows must be within your preferred Career Pathway. Your Career Pathway should also be documented in your Seven Year Education Plan and Profile.

Packet, Paper and Thank-you Letter Due within 1 week of Job Shadow
JOB SHADOW
Career Interest Form

Student name: ________________________________ Year of Graduation: ________

CAREER PATHWAYS:
Place a 1 and 2 to show your order of preference. This should match your 7 year plan.

_____ Arts and Communications  _____ Business & Management
_____ Health Services  _____ Human Resources
_____ Industry & Technology  _____ Natural Resources

TOP THREE CAREER/JOB CHOICES IN YOUR CAREER PATHWAYS:

Pathway #1: ____________________________________________
   Job A. ____________________________________________
   Job B. ____________________________________________
   Job C. ____________________________________________

Pathway #2: ____________________________________________
   Job A. ____________________________________________
   Job B. ____________________________________________
   Job C. ____________________________________________

Local businesses to contact:
____________________________________________________ Phone ________________
____________________________________________________ Phone ________________
____________________________________________________ Phone ________________

Final Choice
Job ___________________________ Business ___________________________

How can you apply your job shadow experience for classroom benefit? (Class presentation, write a paper for extra credit, use the experience for a class project, etc.)

__________________________________________________________________________

__________________________________________________________________________

List any times or days when you might not be able to do a job shadow. _______________________
__________________________________________________________________________

__________________________________________________________________________

All job shadows are off campus. How will you arrange transportation? (be specific: parents, own car, relatives)
__________________________________________________________________________

__________________________________________________________________________
Job Shadow
Parent/Guardian Authorization & Release

Student name: ___________________________ Year of Graduation: ________

Shadow Host: ___________________________ Phone _____________

Business Name: ___________________________

Business Address: ___________________________

Business Phone: ___________________________

Job Shadow Date: _______________ Time _______ to _________

Participation in the above described field trip, curricular activity or course will necessitate your child traveling to another location. Because Crook County School District transportation is not available for this purpose, parental/guardian release is required to allow your child to use private transportation. Please be informed, a driver's personal automobile insurance is in effect while making this trip. Students using private cars are not covered by the Crook County School District's insurance. Be advised that all rules and regulations governing student conduct are applicable during this activity, including transportation to and from the destination. Alternative assignments are available to students who do not have parent/guardian permission to participate.

I, agree to release, hold harmless, indemnify and defend Crook County School District (hereinafter the District) from any claims, loss, or liability arising out of or related to any curricular activity including any that may occur before, during, or after the attendance of my child or ward at curricular activities, whether due, in whole or in part, to the negligence of the District or any other theory of liability against it, or any other cause. I understand that there are inherent and other risks involved in travel to and from, and attendance at curricular activities. I freely and voluntarily accept these risks for my child or ward and all other risks associated with travel to, and attendance at curricular activities. I also understand and agree that the District is not responsible for the time or manner in which my child or ward may arrive at or leave curricular activities.

_________________________________________
Parent/Guardian Signature Date: _________________

_________________________________________
Student Signature (if over 18 years of age) Date: _________________
Job Shadow
Student Contract & Teacher Consent

STUDENT CONTRACT

I, ______________________________, understand that it is a privilege to participate in the Job Shadow and that people outside of school are giving up valuable time to help me learn about their job. By signing this contract, I agree to complete all of the requirements as outlined in the Job Shadow Student Packet. I also understand that I am responsible for making up work in classes that I may miss for my job shadow. I will attend my other classes as normal on the day of my job shadow.

In addition, I agree to:
- Complete all of the listed requirements
- Contact the employer if I am unable to attend the Job Shadow
- Dress appropriately for the Job Shadow

______________________________  ______________________
Student Signature              Date

______________________________
Print Name

TEACHER CONSENT

I agree that ____________________ will be excused from my class to participate in a (student) job shadow on the date indicated below. The student will be responsible for completing all make-up work according to a schedule that I determine with him or her.

1. Teacher’s name ________________________________
   Date/time of class to be missed _____________________________
   Comments/Homework Assignment _____________________________
   Teacher’s signature ______________________________________

2. Teacher’s name ________________________________
   Date/time of class to be missed _____________________________
   Comments/Homework Assignment _____________________________
   Teacher’s signature ______________________________________

3. Teacher’s name ________________________________
   Date/time of class to be missed _____________________________
   Comments/Homework Assignment _____________________________
   Teacher’s signature ______________________________________

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Job Shadow
Host Verification & Evaluation

Please verify the student’s time with you:

Student Name ___________________________ Job Shadow Date ____________________

Time in ________________________________ Time out ______________________________

Job Shadow Host Name (First and Last - Please Print) ________________________________

Title __________________________________________

Business Name ________________________________ Phone __________________________

Business Address __________________________________________

Host E-mail __________________________________________

Host Signature __________________________________________

Host Evaluation

So that we may continue to improve the process, please complete the following brief evaluation upon completion of the job shadow.

Please rate the following on a scale of 1 (strongly disagree) to 5 (strongly agree).

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<tr>
<th>Strongly Disagree</th>
<th>Strongly Agree</th>
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I was well prepared by the student to be a Job Shadow host. 1 2 3 4 5

As a result of this Job Shadow, I gained a new perspective of my job. 1 2 3 4 5

The Job Shadow was a worthwhile learning experience for the student. 1 2 3 4 5

I enjoyed the experience and I would be willing to do it again. 1 2 3 4 5

How could school (teachers and/or students) better support you throughout the experience?

Additional comments:

Please return to Crook County High School, 1100 SE Lynn Blvd., Prineville OR 97754

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Employer Interview

Using the topics and questions below, interview your host/employer (resource person) and record the answers. (Do not give this to the host/employer to fill out)

What is your job title? __________________________________________

What are your main job tasks on a typical day? What are your five most important activities?
________________________________________________________________
________________________________________________________________

What problems or challenges are there in this type of work? _________________
________________________________________________________________

What are the benefits of doing this kind of work? (Income, fringe benefits, advancements)
________________________________________________________________
________________________________________________________________

What kind of training or education qualified you for your job? _________________
________________________________________________________________

What entry-level jobs are there in this field? ________________________________
________________________________________________________________

What special skills are needed in your work? ________________________________
________________________________________________________________

What advice would you give someone trying to enter this field? _________________
________________________________________________________________

What do you like best about your job? ______________________________________
________________________________________________________________

What do you like least about your job? ______________________________________
________________________________________________________________
What is an entry-level salary for this job? ________________________________

What is the highest salary for this job? ________________________________

How did you get from high school to where you are now in your career? ____________________________________________________________

What one piece of advice would you give me if I wanted to pursue this career? ____________________________________________________________

Make up THREE additional questions for your employer.

Your first question and answer:

1. Q: ________________________________
   A: ________________________________

Your second question and answer:

2. Q: ________________________________
   A: ________________________________

Your third question and answer:

3. Q: ________________________________
   A: ________________________________
Observation

Give an example of how you observe your job shadow host using the following skills as a part of his or her work.

EXAMPLE
Organization: Office Manager keeps “in” and “out” boxes for paperwork

Organization: ____________________________________________________________

Planning: ______________________________________________________________

Reading: ______________________________________________________________

Writing: ______________________________________________________________

Math: _________________________________________________________________

Science: ______________________________________________________________

Art: _________________________________________________________________

Creative Thinking: ______________________________________________________

Listening: ____________________________________________________________

Speaking: _____________________________________________________________
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<thead>
<tr>
<th>Decision Making:</th>
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<td>Analyzing Problems:</td>
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<td>Using Technology:</td>
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<tr>
<td>Cooperating with others:</td>
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<td>Customer Service:</td>
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Notes on other interesting observations:  

_________________________________________________________________________

_________________________________________________________________________

_________________________________________________________________________

_________________________________________________________________________

_________________________________________________________________________

_________________________________________________________________________

_________________________________________________________________________

_________________________________________________________________________
Job Shadow Reflection Paper Guide

Your reflection paper is due within one week of your job shadow. See the MLA format page in this packet for instructions and an example. Please discuss the following topics:

1. Why did you choose this job shadow?
2. What kind of working conditions were you in?
3. What did you like best about your Job Shadow experience?
4. What did you like least about your Job Shadow experience?
5. What surprised you most about the experience?
6. What ideas and expectations did you have about this job and career pathway prior to going on the job shadow? How do they fit into your education and career plans?
7. In reality, how did the company and the occupation you observed fit into your education and career plans? How do they differ?
8. Is this an occupation/career path that you still want to pursue? Why?

KEEP A COPY OF YOUR JOB SHADOW REFLECTION PAPER TO INCLUDE IN YOUR SENIOR CAREERS CLASS PORTFOLIO.
APPENDIX A: SAMPLE FORMS

Sample Phone Script for Job Shadow Request

WORKSHEET

Company Name: ______________________ Phone Number: ______________________
Employee Name: ______________________ Job Title: ______________________
Business Address: ______________________
Directions to Site: ______________________
Special Instructions (dress code, safety gear, etc.):
________________________________________

Job Shadow Date: ______________ Start Time: __________ End Time: __________

PHONE SCRIPT

“May I speak with ____________________________”

“Hello. My name is ______________________. I am a student at Crook County High School and I am
interested in your business and possibly pursuing a career in ___________ (career area). Would
you be interested in allowing me to job shadow you or someone else in your business for ____________
___________ (usually 3 hours - ask what amount of time is best for them).

- Be ready with information on dates and times
- Be prepared to explain the Job Shadow definition
- Explain that you will arrange transportation
- Discuss your responsibilities as a student (so that employer does not feel
  that they will lose
  productivity time)

If the employer/business is willing to set up the job shadow, be sure to complete the following
information:
- Worksheet above
- Let the employer know you will be calling a few days ahead of time to confirm the Job Shadow.

If they cannot help you, ask, “Is there anyone else that you know of in this industry/business that
might be able to help me with a job shadow”?

Other contacts:

#1 Business Name: ______________________
   Contact Name: ______________________ Phone Number: ______________________

#2 Business Name: ______________________
   Contact Name: ______________________ Phone Number: ______________________
Sample Phone Script for Job Shadow Confirmation

“May I speak with ________________ (employer name), please? Hello, this is __________________________ (your name) from Crook County High School. I am calling to confirm my Job Shadow on ________________ (day, month) from _________ to _________ (beginning time to finish time).”

“Thank you, and I look forward to meeting you.”

If the employer is unavailable, leave the above information in a message and ask when would be a better time to call back. It is your responsibility to follow through on the confirmation.
APPENDIX B: JOB SHADOW ETIQUETTE

Appearance:

Dress as if you were interviewing for a job. Dress appropriately for the workplace. Most employers are looking for neat, clean clothes. Do not wear clothing that conveys a political or social statement.

Many companies have rules regarding body piercings. Please do not wear a nose or eyebrow ring or stud during your Job Shadow. The fact that you are sensitive to an employer's concerns and that you are willing to comply with business expectations regarding appearance will make a lasting impression.

Do:

- Turn off your cell phone.
- Arrive a few minutes early to allow time for parking and locating the person you’ve made contact with. Introduce yourself and offer a handshake and a smile. Be attentive and act interested the entire time.
- Apply general rules of courtesy. Say please, thank-you and excuse me.
- Use good posture and eye contact.
- Bring a folder or binder with paper to take notes, your observation sheets, the employer interview questions and the Host Employer evaluation (give this to the host employer along with an envelope addressed to your advisor at CCHS).
- You may need to fill in some of the questions when you get home, so listen carefully, observe and take good notes.
- Obtain a business card. You will need a complete name, job title and address for your thank-you letter (if they do not have a business card, write down the information). Add this person to your contact list. Use the information to write a thank-you letter (mandatory). There is a sample thank-you letter in the packet.

Don’t:

- Chew gum or candy.
- Bring food or drinks into the workplace.
- Use profanity or vulgarity.
- Wear your hat indoors.
MLA Format

Reflection Paper

Your essay should be typed, double-spaced on standard-sized paper (8.5 X 11 inches) with margins of 1 inch on all sides. You will provide a double-spaced entry in the top left corner of the first page that lists your name, your instructor's name, the course, and the date. Then center your title on the line below the date, and begin your essay immediately below the title. For example:

Molly Parker
Mrs. Moe
Connections
2 April 2009

Title of Paper Centered Here

Begin your paper with an indented paragraph. The entire paper is double-spaced and correct MLA format uses 12-point font - Times New Roman! Do not add extra spaces between paragraphs.

Your paragraph spacing should look just like this. Each paragraph should contain AT LEAST five sentences. Your paper should be at least two pages in length. Ask for help with proofreading. Check for grammar and spelling errors. Your reflection paper is due within one week of your job shadow.
Thank-you Letter Instructions

Writing a thank-you letter to your Job Shadow host shows that you recognize and appreciate their contribution to your success. Thank-you letters go a long way toward making a great impression on your new contacts; it helps them remember you and shows that you value the time you spent together. There are a few critical points to remember when writing your thank-you letters:

- Make sure your handwriting is clear and legible. You may always type the letter if you prefer. If you type, make sure that you personally sign it.
- Always date your letter.
- Use complete sentences with proper punctuation.
- Begin your letter with a sentence that specifically thanks the host/employer for the time and effort they spent in educating you about their career and assisting you to complete your packet.
- State several specifics that you learned and enjoyed during your Job Shadow.
- Check for any grammatical or spelling errors. Ask someone to proofread it for you.
- Make a copy of the letter and attach it to the Job Shadow packet.

If you prefer to type your letter, this is the correct format:

Date
(3 spaces)
Business Name
Host/Employer Name
Number & Street Address
City, State & Zip Code

Dear ____________:

BODY OF LETTER

Sincerely,
(3 spaces)
Handwritten Signature
Your Name Typed

Thank-you Envelope Example:

Your Name
Number and Street
City, State, ZIP

Business Name
Host/Employer Name
Number and Street
City, State, Zip