

Student Name:

New Jersey Structured Learning Experience (SLE) Sample Individualized Student Training Plan

For All Paid/Unpaid Internship, Volunteer, Community Service, Service Learning & School-Based Enterprise SLEs

Career Cluster®:

District/School:		SLE Start Date:		
Business/Agency:		SLE End Date:		
Workplace Experience	SCED code:			
General description of	SLE:			
In addition to safety tr	aining provided by the school, the SLE stude	nt should receive:		
Business/age	ncy's new employee orientation training.			
	ncy's new employee safety and health trainin	g.		
Tools, equipn	nent, and personal protective equipment orie	ntation, if applicable, to be used as part	of the SLE.	
	ctives must align to New Jersey Student Learn			
	ndards to address. Please attach additional p			
Learning Objective: \	Norksite Safety and Health Practices			
	ractices (CRP), Standard 9.3 Career and Techr	nical Education or other recognized indus	try standards)	
Standard addressed:	Activities that will support the standard:	How will attainment be assessed:	Met/Unmet	
Learning Objective: Career Interests/Planning Goals				
	ractices (CRP), Standard 9.2 Career Awarenes	s. Exploration, and Preparation)		
Standard addressed:	Activities that will support the standard:	How will attainment be assessed:	Met/Unmet	

Learning Objective: Occupational/Technical Learning (NJSLS, Career Ready Practices (CRP), Standard 9.3 Career and Technical Education or other recognized industry standards)				
	Activities that will support the standard:	How will attainment be assessed:	Met/Unmet	
We understand that the SLE and worksite are consistent with "Guidelines for Vocational Education Programs for Eliminating Discrimination and Denial of Services on the Basis of Race, Color, National Origin, Sex and Disability," as well as with federal requirements of nondiscrimination in education programs or activities receiving federal financial assistance. 34 C.F.R. §104.4, §106.38 (a)(b), and §100.3 (c). We have reviewed and are in agreement with the description, learning objectives, activities, and assessments, and assignment of grade and if applicable course credit, of this school-sponsored SLE. We agree to complete all paperwork and maintain all documentation required for this SLE. The SLE Coordinator or Cooperative Education Coordinator and the worksite mentor agree to regularly monitor the learning objectives set forth in this individualized student training plan. The student agrees to uphold their responsibilities in compliance with this individualized student training plan.				
SLE Coordinator	Siį	gnature [Date	
Worksite Mentor	Siį	gnature [Date	
SLE Student	Siį	gnature [Date	
Parent/Guardian	Sig	gnature [Date	

Attach this completed form, the approved district board of education policy for the provision of health, safety, and medical emergency services (*N.J.A.C.* 6A:16-2.1 (a)) and if applicable the completed employment certificate (working papers) to the Business/Agency Agreement for this SLE.

Signature

School Administrator (Optional)

Date

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