

WORK AND VOLUNTEER EXPERIENCE (WAVE) AGREEMENT

Standard Placement

| <u>Student Information:</u> | <u>School Information:</u> |
|---|---|
| Student Name: Ronald McDonald Home Address: , BC Grade: 11 Date of Birth: January 4, 2004 Phone: 604-444-3333 Email: | School: School Board Office Career Ed Address: 4875 222 St, Langley, BC, V3A 3Z7 Principal: George Kozlovic School Phone: 604-534-7891 WAVE Teacher: Geoff McSherry WAVE Teacher Email: gmcsherry@sd35.bc.ca |

| <u>Parent/Guardian Information:</u> | <u>Student Emergency Contact Information:</u> |
|--|---|
| Name: Mr. Hamburger Phone: 604-444-3333 Cell Phone: 604-444-3333 Work Phone: 604-444-3333 Email: hamburgler@gmail.com | Name: Pepperoni McPizza Phone: 778-887-7783 Cell Phone: 778-887-7783 Work Phone: 778-887-7783 Email: |

| <u>Employer Information:</u> | |
|---|---|
| Employer: Fake WAVE Employer Inc. Address: 234 Hunter St, Langley, BC, V3V 3F4 | Supervisor(s): Scrooge McDuck Phone: 604-555-6666 Email: sm@888bikes.com |

| <u>WAVE Placement Information:</u> | |
|--|--|
| Position/Activity Name: Bike assembler and tester | Start Date: January 4, 2021 End Date: January 5, 2022 |
| WAVE Hours Arrangement: Monday to Wednesday 4pm to 7pm. Additional shifts agreed on between the student and employer can occur Monday to Sunday from 8am to 8pm. <i>(subject to change based on operational needs and student schedule)</i> | |
| Typical Duties: Assembling bikes, testing out assembled bikes, fixing bikes that require special attention. | |
| Dress Code: Casual. Long hair must be tied back. | |
| Additional Notes: | |

| <u>Three essential skills the student will develop the most during this WAVE:</u> | | |
|---|--|--|
| <input checked="" type="checkbox"/> Reading | <input type="checkbox"/> Document Use | <input checked="" type="checkbox"/> Oral Communication |
| <input type="checkbox"/> Writing | <input checked="" type="checkbox"/> Computer Use | <input type="checkbox"/> Continuous Learning |
| <input type="checkbox"/> Thinking | <input type="checkbox"/> Working with others | <input type="checkbox"/> Numeracy |

| |
|---|
| <u>Three employability skills the student will develop the most during this WAVE:</u> |
|---|

| | | |
|--|--|---|
| <input checked="" type="checkbox"/> Communicate | <input type="checkbox"/> Manage Information | <input checked="" type="checkbox"/> Work safely |
| <input type="checkbox"/> Work with others | <input checked="" type="checkbox"/> Be responsible | <input type="checkbox"/> Learn continuously |
| <input type="checkbox"/> Be adaptable | <input type="checkbox"/> Use numbers | <input type="checkbox"/> Think and solve problems |
| <input type="checkbox"/> Participate in projects and tasks | <input type="checkbox"/> Demonstrate positive attitudes and behaviours | |

| <u>Student Training Plan</u> | | | |
|---|--|--|-------------------------------------|
| Skill/Activity and Tool/Equipment the student will experience or use during WAVE (examples below): | | By the end of WAVE, the student should experience/complete the skill/activity: | |
| -Observing staff during a sales call with a customer -Assisting staff members with organizing and scanning files -Light cleaning including COVID-19 sanitizing and conducting temperature checks on staff entering the building | | By observation | With assistance |
| Assembling bikes for customers | | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Inventory control and organizing store products | | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Testing bikes prior to customer delivery | | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Warranty repairs for bikes | | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

The parties agree to a Work And Volunteer Experience placement (the "WAVE placement") for the Student with the Worksite Employer on the following terms and conditions:

- 1. TERM OF AGREEMENT:** This agreement will be in effect from dates written on reverse unless it is ended at an earlier date.
- 2. STUDENT DUTIES:** The Student agrees to perform without payment the duties assigned to the Student from time to time by the Worksite Employer in consultation with the School Board's representatives. The Student agrees to comply with the Worksite Employer's rules and all applicable safety regulations. Special Rules and Regulations are to be communicated by the Worksite Employer to the Student.
- 3. DAYS AND HOURS OF THE WAVE PLACEMENT:** The Student agrees to perform those duties as assigned by the Worksite Employer in accordance with paragraph 2 on the days and during the hours indicated on the reverse or at such other times, in writing, as may be agreed by the Worksite Employer, School Board and Student. If the Student is employed by the Worksite Employer beyond the days and hours agreed upon by the Worksite Employer, School Board and Student, none of the provisions of this Agreement apply.
- 4. SUPERVISION:** The Student agrees to be under the direct supervision of the Worksite Employer. The Worksite Employer agrees to supervise the Student at all times during the WAVE placement.
- 5. WORKSITE SAFETY ORIENTATION:** The Worksite Employer will provide to the Student with Worksite specific safety training prior to the student completing any tasks/work. The Employer will not allow the Student to perform any duties, unless the Student has all personal protective equipment required for the tasks to be performed by the Student.
- 6. IN-SCHOOL SAFETY ORIENTATION:** The Student will receive an In-School Safety Orientation before the Student will perform any duties.
- 7. BOARD ACCESS:** The Worksite Employer agrees to allow School Board representatives to have access at any time to the Worksite Employer's Worksite and the Student.
- 8. TRANSPORTATION:** The parties agree that the parent(s) or guardian(s) and the Student are solely responsible for the Student's transportation to and from the Worksite Employer's Worksite. In some cases, arrangements may be made for School Board members or Worksite Employees to provide transportation. Details of this will be described on the first page of this agreement.
- 9. FEEDBACK:** When requested by the School Board, the Worksite Employer will complete a feedback form provided by a School Board representative based on the Student's skills and performance during

WAVE.

10. WORKERS' COMPENSATION ACT INJURY COVERAGE:

1. Students in a WAVE placement at a Standard Paid WorkSite may be covered by the Workers' Compensation Act as they are considered to be workers of the Employer.
2. Students in a WAVE placement at a Standard Unpaid WorkSite may be covered by the Workers' Compensation Act and are considered to be workers of the Government of the Province of British Columbia for Workers' Compensation purposes only. Coverage is limited by the terms and conditions set out in the Workers' Compensation Order OIC 344/11.

11. NOTICE OF INJURY: The Worksite Employer will, if a Student is injured, immediately report the occurrence of injury to the School Board by contacting the WAVE Teacher and School Principal at 604-534-7891 and the Career Education Department at 778-736-0710. If the injury occurs out of normal school hours, contact the Parent(s)/Guardian(s) or emergency contact and the Career Education Department at 778-736-0710.

12. NOTICE OF SERIOUS INCIDENT: The Worksite Employer will, if a Student is involved in a serious incident, immediately report the occurrence to the School Board by contacting the WAVE Teacher and School Principal at 604-534-7891. If the WAVE Teacher and School Principal are unreachable, contact the Career Education Department at 778-736-0710.

13. MINIMUM AGE: The parent(s) or guardian(s) of the Student warrant that the Student is 14 years of age or older at the date of this Agreement.

14. EFFECT ON EMPLOYEES: The Worksite Employer agrees that the placement of the Student will not affect the job security of any employee of the Worksite Employer and will not affect the Worksite Employer's hiring practices. The placement of the Student will be in addition to the Worksite Employer's full complement of employees. The Student will not be a replacement for any employee.

15. TERMINATION OF THE AGREEMENT: Any party to this Agreement may end it at any time by giving notice in writing to all other parties at the addresses given in this Agreement.

16. REFERENCE: In this Agreement a reference to the School Board includes School Board officers, employees or representatives acting within the scope of their employment.

17. CONFIDENTIALITY: All parties to maintain in the strictest confidence, information that comes to their knowledge during the WAVE.

18. MONITORING: Board staff will monitor the WAVE placement by contacting the Student and Employer on a regular basis.

To be completed by the Authorized Board Representative:

| | |
|--|---|
| <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Initial: <u>GM</u> | District staff have visited and approved the employer for student placements within the last three years |
| <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Initial: <u>GM</u> | A WorkSafe BC Clearance Letter is on file indicating the Employer has active WorkSafe BC coverage |
| <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Initial: <u>GM</u> | The employer has confirmed they have at least one employee |
| <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Initial: <u>GM</u> | The Student has completed an In-School Safety Orientation (Before WAVE and/or online Workplace Safety Training) |
| <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Initial: <u>GM</u> | The Employer has completed or will complete a Worksite Safety Orientation with the student before work begins |
| <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Initial: <u>GM</u> | A signed Informed Consent has been collected from the Parent(s)/Guardian(s) |

Signatures:

| | | | |
|---|--|--------------|--|
| Employer: | | Date: | |
| Authorized Board Representative: | | Date: | |
| Parent(s)/Guardian(s): | | Date: | |
| Student: | | Date: | |
| School Administrator: | | Date: | |