



## Work-Based Learning Interest Form

If you are interested in WBL for the 2017-2018 school year, please complete this information & return to the front office. You may email me with any questions at [Freels.Courtney.C@muscogee.k12.ga.us](mailto:Freels.Courtney.C@muscogee.k12.ga.us).

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Current Grade Level: \_\_\_\_\_ Expected Graduation Year: \_\_\_\_\_

Email Address: \_\_\_\_\_

Do you check your email daily? Yes No

Cell Number: \_\_\_\_\_ Can you receive texts? \_\_\_\_\_

Describe your future Career/Job interest:

List any related courses you have completed (CTAE courses).

Did you complete a career pathway? If so, what was it?

List any school or community activities you are in (please include any CTSO such as: SkillsUSA, HOSA, DECA, FBLA, ect.)

Explain why you want to participate in the Work-Based Learning Program:

Will you have a vehicle and driver's license, a school parking permit, and will you drive to school during the 2017-2018 school year? \_\_\_\_\_

Are you employed now? \_\_\_\_\_ If yes, where are you employed? \_\_\_\_\_

How many hours do you work in one week? \_\_\_\_\_

Which periods do you anticipate could be scheduled for your internship/job?

Circle all that apply: 1<sup>st</sup> 2<sup>nd</sup> 3<sup>rd</sup> 4<sup>th</sup> 5<sup>th</sup> 6<sup>th</sup> 7<sup>th</sup>

Any special comments or concerns about the program? \_\_\_\_\_

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As required by Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, Title II of the Americans with Disabilities Act, Title IX of the Education Amendments of 1972, the Age Discrimination Act of 1975, and the Americans with Disabilities Act of 1990, the Muscogee County School District does not discriminate on the basis of race, color, religion, national origin, sex, age, or disability in admission to its programs, services, or activities, in access to them, in treatment of individuals, or in any aspect of their operations.