A job shadow experience is literally spending time “in the shadow” of a person doing his or her job. It immerses each student in the world of work, where they can get first-hand information about job skills and careers. By bringing students into the workplace to see a marketing professional or a health care technician at work, very real and tangible options come alive for them. Job shadowing creates a critical link between education and success. This helps students not only visualize themselves in that work environment but empowers them to identify what educational choices will coincide with that career path.

Great Falls Public Schools Job Shadow Program has been matching students with employers since 2005 and the successful relationships we have built with community business partners is continually growing.

For the 2014/2015 school year, Job Shadows for Juniors and Seniors will be placed for students in Med Prep Classes and Developing Child Classes.

- CMR Med Prep Student Shadow Request Form
- CMR Developing Child Student Shadow Request Form
- GFHS Med Prep Student Shadow Request Form
- GFHS Developing Child Student Shadow Request Form
- PGEC Med Prep Student Shadow Request Form

The links below are REQUIRED DOCUMENTATION that is to be completed BEFORE you arrive at the Job Shadow site. If you are missing any of these documents, an employer will turn you away. When you receive your placement email confirmation, print it out and make sure it accompanies you to the Job Shadow appointment along with the forms identified below.

- Expectations & Responsibilities
- Confidentiality Statement
- Parent Permission
- Talking Points (Guideline of questions for students to ask during the job shadow)
- Employer Evaluation
- Student Evaluation (to be completed AFTER your Job Shadow experience is over along with writing a thank you note to your Job Shadow Host)
Your job shadow host may have additional documentation required for their organization. These are IN ADDITION to the above forms:

**Benefis:**
- Confidentiality Agreement
- Waiver of Liability
- TB Test
- Flu Shot
- Picture ID

**Clinic:**
- Confidentiality Agreement
- Release of Indemnity
- TB Test
- TB Health History Questionnaire
- Welcome Letter

**GF Emergency Services:**
- Confidentiality Agreement
- Release of Liability
- Ride-Along Rules

**GF Police Department:**
- Confidentiality & Background Agreement
- Release of Indemnity

**Fire & Rescue:**
- Confidentiality Agreement
- Indemnity Agreement

**Skyline Vet:**
- Release of Liability
Student Expectations and Responsibilities

- **Punctuality**
  - Show up on time – Plan to arrive 10 – 15 minutes early
  - If you have to cancel, you are responsible for making the call to the business contact person and your instructor. You can find this information in the placement email.

- **Professional Conduct**
  - Smile and make eye contact
  - Use a firm handshake and friendly greeting
  - Be attentive–avoid slouching or shuffling
  - Speak distinctly and pleasantly – avoid slang
  - Bring some prepared questions with you (see Talking Points) so you can ask informative questions of your Job Shadow host

- **Professional Dress & Grooming**
  - Wear clean and neat clothing – dress appropriately for where you are doing your Job Shadow
  - Jeans are only allowed if appropriate for the workplace
  - Clean shoes, laces tied, appropriate outfit (no open toe shoes)
  - Modest jewelry
  - Hair must be clean, styled or combed (facial hair must be clean, well groomed, and neatly trimmed)
  - Proper personal hygiene
  - Please cover any tattoos
  - NO strong scents (it is best if you abstain from wearing perfume or cologne during your shadow)
  - NO tee shirts with logos, hats, or shorts
  - NO tight pants or extremely baggy, No underwear showing and NO tight or short skirts, revealing necklines or waists – tops need to cover shoulders, back and waist.
  - NO facial piercings

  **If you are not appropriately dressed, the employer will ask you to leave**

*Your behavior and appearance throughout the job shadowing experience is a reflection of your character, your family, your school, and your school district. Make yourself and others proud of your efforts. Please remember, this is a GIFT from our community.*

I____________________________________, have read the above protocols and agree to all conditions outlined.

________________________________________  ______________________________
Signature                                      Date
Confidentiality Statement

Great Falls Public Schools welcomes you to the job shadowing experience and wants you to find it beneficial to your future work endeavors. During your time in your respective job shadow, you will be observing student/patient/clients and have limited access to various student/patient/clients’ information. It is very important that all student/patient/clients are viewed in a confidential manner; therefore, all student/patient/client information must be held in the strictest confidence. By State Statute, Montana protects this information, making it a criminal offense and/or subjecting anyone improperly releasing patient information subject to civil penalties.

All members of the job shadow program must agree to the confidentiality statement below:

Date: ______________

I _______________________________________ will abide by the laws of the State of Montana and will keep all student/patient/client information confidential while participating in the job shadow experience.

__________________________________________
Student Signature

__________________________________________
School Witness Signature

__________________________________________
Job Shadow Location
Dear Parent(s):

During the school year, if a student is eligible, they have the opportunity to shadow a career that is of interest to them. Participation in the career experience is part of specific course curriculum. It is an excellent approach to educating the students as it enhances their learning experience. Participation in these experiences means that the School District will not always provide transportation.

In order for your child to participate in this off-campus activity, he or she may choose to drive, ride with another student or you as his/her guardian may transport him/her. Please read the following consent form, complete, and sign it before returning it to the instructor. If you have any questions, please feel free to contact your child’s Med Prep or Developing Child Instructor.

1. I give permission for my son/daughter (name) __________________________ to drive to “on-site” or field trip projects in connection with his/her participation in the Job Shadow Program. This permission includes the following means of transportation (please SIGN ALL that apply.)

   __________________________ Drive his/her own vehicle

   __________________________ Drive other students in his/her vehicle

   __________________________ Ride in a vehicle driven by another class member

   __________________________ Ride with a parent/guardian of another student

   __________________________ I (parent/guardian) will transport

2. If my son/daughter will be driving to and from “on site” projects or field trips, I certify that he/she has a valid driver’s license and the vehicle which he/she will be driving has and will have minimum liability insurance as required to Montana Law.

   Parent/Guardian ____________________________ Date: ____________
TALKING POINTS
To be completed by the student DURING the job shadow

Student Name: ____________________________  Job Shadow Site: ________________
Career/Occupation: ______________________  Host’s Name: ____________________

Interview your host using the questions below. Write your host’s responses in the space provided. Feel free to ask additional questions that may come to mind while you are there.

1. How would you describe a typical day at your job?
   Do you work alone or with a team?
   What is the stress level?

2. What do you like most about your job? What do you like least?

3. What education and/or training do you need for this job?

4. What is the salary range for various levels in this field?

5. What high school subjects should I take to prepare for a career in this field?

6. What personal qualities are most important to be successful in this career?

7. How has technology affected this job?

8. How do you see jobs in this field changing in the next five – ten years?

9. How did you get your job (testing, interview, word of mouth...)?

10. What advice would you give someone who is thinking about your career?

11. If you could do things over again, would you choose the same path for yourself (why - why not)?

Make sure to thank your host for this opportunity and their time before you leave the job site!
Job Shadow - Employer Evaluation

Thank you for your commitment to the Great Falls Public Schools Job Shadow Program. Your willingness to host a student at your place of employment is greatly appreciated. We are very interested in the long-term success of the Job Shadow program and would welcome your feedback.

This form will be given to you by the shadowing student. Please return this form to the student at the conclusion of their job shadow.

Shadow Supervisor__________________________ Shadow Site_______________________
Student__________________________________ School___________________________
Date of Shadow____________________________

Please evaluate the student's performance using the following scale

<table>
<thead>
<tr>
<th>You will be rating the student in Punctuality, Professional Appearance, Conduct, and Communication</th>
<th>Excellent</th>
<th>Good</th>
<th>Fair</th>
<th>Needs to Improve</th>
<th>NA or Didn't Observe</th>
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<tbody>
<tr>
<td>Student was punctual (reported to and departed at appropriate time)</td>
<td></td>
<td></td>
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<tr>
<td>Student dressed appropriately for the work setting and was well-groomed</td>
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<tr>
<td>Student was courteous and displayed appropriate behavior</td>
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<td>Student was cooperative and willing to accept guidance</td>
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<td>Student was willing to conform to rules and regulations</td>
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<td>Student related well to host and others</td>
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<td>Student asked appropriate questions</td>
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<td>Student demonstrated genuine interest</td>
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Please indicate your response toward your experience as a job shadow host

<table>
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<tr>
<th>Your experience as Job Shadow host</th>
<th>Excellent</th>
<th>Good</th>
<th>Fair</th>
<th>Needs to Improve</th>
<th>NA or Didn’t Observe</th>
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How would you rate our Job Shadow Program

General Comments or Suggestions to improve our Job Shadow program ____________________________

_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________