Worksite Learning
Pre-Employment Information

Name_____Grade_____EMAIL_____

Phone_____Cell_____Address_____

Mother's Name_____Employer/Title_____

Fathers's Name_____Employer/Title_____

<mark>CAREER PATH:</mark>	<mark>CONNECTING CLASS:</mark>

1ST SEMESTER-- <mark>*Give Student Evaluations to these teachers*</mark>

	CLASS	TEACHER
0		
1		
2		
3		
4		
5		
6		

2ND SEMESTER

	CLASS	
0		
1		
2		
3		
4		
5		
6		

SENIOR SCHEDULE-1ST SEMESTER (How will WSL fit in your schedule…….)

	CLASS	
0		
1		
2		
3		
4		
5		
6		