

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

Student Name:		Career Cluster®:		
District/School:		SLE Start Date:		
Business/Agency:		SLE End Date:		
Workplace Experience	SCED code:			
General description of	SLE:			
In addition to safety tra	aining provided by the school, the SLE stude	nt should receive:		
Business/ager	ncy's new employee orientation training.			
Business/ager	ncy's new employee safety and health trainin	g.		
Tools, equipm	nent, and personal protective equipment orie	ntation, if applicable, to I	oe used as part of	the SLE.
	ctives must align to <u>New Jersey Student Learn</u> ndards to address. Please attach additional p			
00000000000000000000000000000000000000	Vorksite Safety and Health Practices			
ri	ractices (CRP), Standard 9.3 Career and Techr Activities that will support the standard:	How will attainment be		y standards) Met/Unmet:
300000000000000000000000000000000000000	Career Interests/Planning Goals ractices (CRP), Standard 9.2 Career Awarenes	ss, Exploration, and Prepa	iration)	
Standard addressed:	Activities that will support the standard:	How will attainment be	assessed:	Met/Unmet:

standard addressed:	Activities that will support the	er and Technical Education or other standard: How will attainment k	
iscrimination and Del equirements of nondi 104.4, §106.38 (a)(b) /e have reviewed and	nial of Services on the Basis of Rad scrimination in education progra	t with "Guidelines for Vocational Edce, Color, National Origin, Sex and Dms or activities receiving federal final	isability," as well as with federal ancial assistance. 34 C.F.R.
naintain all document vorksite mentor agree	ation required for this SLE. The S to regularly monitor the learning	this school-sponsored SLE. We agree LE Coordinator or Cooperative Educ g objectives set forth in this individu iance with this individualized studer	e to complete all paperwork and ation Coordinator and the salized student training plan. The
naintain all document vorksite mentor agree tudent agrees to uph	ation required for this SLE. The S to regularly monitor the learning	his school-sponsored SLE. We agree LE Coordinator or Cooperative Educ g objectives set forth in this individu	e to complete all paperwork and ation Coordinator and the salized student training plan. The
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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.