

LRHS On-The-Job Training (OJT) Application

2024 - 2025

Please submit this completed application to Mr. Cuervo, room 591 by March 4th

PERSONAL INFORMATION

Name (Full Name): _____ Grade Level for 2024-2025 (circle one): 11th 12th

Student ID #: _____ Do you have a Social Security Number: Yes No

Home Address: _____ City: _____ Zip: _____

Cell Number: _____ Date of Birth: _____ Age: _____

Driver's License #: _____ Email: _____

Do you have a car? Yes / No _____ How do you get to school/Work? _____

EDUCATIONAL RECORD

Are you on track to graduate with credits & FSA/EOC Requirements? _____ GPA: _____

Clubs or Extracurricular Activities at LRHS: _____

EMPLOYMENT INFORMATION

Are you currently working? (circle one) Yes No

Employer: _____ Date Employed: _____

Phone #: _____ Address: _____ City: _____ Zip: _____

Supervisor Name: _____ How many hours a week do you work? _____

Position/Duties: _____ Will this be your OJT job for next year? _____

Are you employed by or work under the direct supervision of a family member? Yes / No _____

EMERGENCY CONTACT INFORMATION

Father's Name: _____ Occupation: _____ Work #: _____ Cell #: _____

Mother's Name: _____ Occupation: _____ Work #: _____ Cell #: _____

Other: _____ Relationship: _____ Work #: _____ Cell #: _____

Which courses do you need to graduate or would like to keep in your schedule?	
Note: Priority will be given to students requesting 2 or more OJT periods.	
DCT Period	Diversified Career Tech (DCT) – required on-campus course for OJT (1 st period)
Course	
Course	
Course	
Course	
OJT Period	OJT – off campus (2 OJT requires a minimum of 15 hours of work per week)
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NUMBER OF OJT CLASS PERIODS YOU ARE REQUESTING: _____

- 1 OJT Period with 7.5 work hours/week = 1 class period
- 2 OJT Periods with 15 work hours/week = 2 class periods
- 3 OJT Periods with 22.5 work hours/week = 3 class periods

* Students leave campus during OJT periods whether they are scheduled to work that day or not.

READ EACH OF THE ITEMS BELOW. Check each box to indicate that you understand these guidelines.

- The student must have an unweighted GPA of 2.0 or higher and be on track to graduate.
- The student must maintain a good attendance and discipline record with the school and employer.
- Prior** to the start of the school year, the student must have paid employment at an OJT eligible job that follows federal laws concerning payroll withholdings & child labor and that also carries workers' compensation & liability insurance. * **Students cannot be 1099 contracted employees**
- Students may not be employed in a "home-based business" that does not have a direct supervisor on site. This includes but is not limited to, in-home childcare, multilevel marketing, and online sales or marketing.
- Students may not be employed by or work under the direct supervision of a family member.
- All required paperwork will be handed out on the first day of class and must be submitted before the student can log work hours or leave campus for OJT.
- The student understands that this is a credit-earning course and that a grade will be issued for each OJT period. Failure to submit required paperwork (timecards, employer evaluations, etc.) or to follow district and state requirements will result in a failing course grade and removal from the OJT program.

I certify that this application is truthful and complete to the best of my knowledge. Any misleading or omitted information could result in my removal from the program. My signature below indicates that I have read, understand, and agree with the above information.

Student Signature _____ Date _____

I give my child permission to participate in the OJT program and certify that this application is truthful and complete to the best of my knowledge. I agree to support this program and help my child follow the state and district requirements.

Parent Signature _____ Date _____

Please note that acceptance of this application by the OJT program coordinator does not guarantee the student's acceptance into this program. Applications are considered in the order received.

DOCUMENTATION SHEET FOR OJT _____

(Student Name)

Take this form to the following people and get their signatures. If you must leave the paper with anyone, please be sure to return and pick it up. ***This form must be completed and turned in with the application.***

Current 1st Period Teacher: _____

ATTENDANCE INFORMATION – PLEASE SEE THE ATTENDANCE DESK

Excused Absences: _____ Unexcused Absences: _____ Tardies: _____

Signature: _____ Date: _____

DISCIPLINE INFORMATION – PLEASE SEE YOUR DEAN

Referrals: _____ Offenses: _____

ISS: _____ Reason: _____

OSS: _____ Reason: _____

TIME OUT: _____ Reason: _____

Signature: _____ Date: _____

GUIDANCE INFORMATION – PLEASE SEE YOUR GUIDANCE COUNSELOR

Unweighted GPA: _____ FSA/FCAT passed? Reading: _____ Math: _____

Is the student track to graduate with credits & FSA/EOC Requirements? Yes / No _____

Required courses needed to graduate: _____

Signature: _____ Date: _____