WORK AGREEMENT

Date: _____

BETWEEN

A. Name of Student: _____
(herein called "the student")

Address: _____ Telephone: _____

Postal Code: _____ Supervising Teacher: _____

B. Name of Employer: _____ Telephone: _____
(herein called "the employer")

Company Address: _____

WHEREAS

1. The school board has approved an Off-campus education program for students in its school pursuant to section 39 of the *Education Act*.
2. The employer and the student have agreed to participate in the said program on the terms and conditions herein set forth.

WITNESSETH

EFFECTIVE PERIOD AND HOURS

1. The parties agree the off-campus education employment contemplated in this agreement shall start on _____, 20___, and end on _____, 20___.

2. The student's standard hours of work for this off-campus employment shall be no more than____ hours per week, distributed as follows:

Day		Maximum Hours*
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		

** School hours plus hours worked should be less than 12 hours per day and less than 60 hours per week. Student work hours should not exceed 8 hours per day or 40 hours per week. Where a student is required to work outside of the recommended maximums, additional health and safety parameters must be outlined on the other side of this work agreement.*

3. **Termination**
   Notwithstanding anything herein contained to the contrary, any party written hereto may, with or without cause, summarily terminate by giving written notice of termination to the parties to this agreement.
4. **Supervision**
   During the hours of employment herein set forth, the student shall be under the direct supervision and control of the employer, provided that the employer shall at all times permit the school authority or its representatives access to the employment site and the student.
5. **Evaluation**
   The employer shall, at the request of the school authority or its representatives, evaluate the student in the performance of his or her duties hereunder and report such evaluation on a form from time to time provided to the employer by the school authority.
6. **Full-time Employee Tenure**
   The employer agrees that the employment of the student hereunder shall in no way affect the job security of any other employee of the employer, nor the employer's hiring practices with regard to full-time employees.

7. **Insurance**
   Pursuant to the *Workers' Compensation Act* (W–15, R.S.A. 2000), and regulations or orders-in-council made thereunder, the student participating in this program is deemed to be a worker of the Alberta Government for the purpose of workers' compensation.

Employer	Student
Off-campus Teacher	Parent or Guardian of Student

Additional Health and Safety Parameters for Students Working Beyond Recommended Hours

(a) The parties acknowledge and agree that the hours set out in subsection (b) are beyond the recommended maximums outlined in the Alberta Education document entitled "Changes in the *Off-campus Education Handbook*" (June 2017). The board and employer represent and warrant that the following additional health and safety parameters are in place to effectively support the student:

1. _____
2. _____
3. _____
4. _____

Approval of Student Schedules Outside of Recommended Hours of Work

Based on sufficient due diligence, the off-campus teacher approves of the student working outside of the recommend hours of work:

☐ Approved ☐ Not Approved

Off-campus Teacher (please print full name): _____

Date: _____ Signed: _____