

(SAMPLE)
ORIENTATION TO BUSINESS

STUDENT'S NAME _____ **DATE** _____

TRAINING SITE _____ **SUPERVISOR** _____

Instructions: Please provide the following information to your student employees. Check each item as it is completed. Return the completed form to the Cooperative Education Teacher-Coordinator.

Company Orientation

- _____ 1. Give student copies of printed materials (handbook, brochures, etc.).
- _____ 2. Explain the company's history.
- _____ 3. Describe the company's service/product line(s).
- _____ 4. Discuss company policies and procedures regarding:
 - () Hours of operation/work
 - () Overtime policies
 - () Pay time period
 - () Vacation policy
 - () Holiday policy
 - () Appropriate dress and grooming
 - () Safety rules
 - () Emergency procedures
 - () Absentee procedures
 - () Parking
 - () Arrival procedures
 - () Departure procedures
- _____ 5. Describe employee benefits such as:
 - () Discounts
 - () Educational assistance
- _____ 6. Describe the relationship of the department to the company (if applicable).
- _____ 7. Discuss specific company/departmental rules including:
 - () Breaks
 - () Work schedules
 - () Days off
 - () Presence of food at work
- _____ 8. Introduce co-workers.
- _____ 9. Explain job responsibilities of co-workers.
- _____ 10. Identify training sponsor/mentor.

Job Orientation

- _____ 11. Show student her/his workstation.
- _____ 12. Describe student's responsibilities.
- _____ 13. Explain the importance of the student's responsibilities to the organization.

(Employer/Mentor)

(Date)

(Student)

(Date)

**(SAMPLE)
TRAINING SITE
VISIT
COORDINATOR
SUMMARY**

<p>During the visit the Workplace Experience Coordinator confers with the employer or trainer to discuss one or all of the following items:</p> <ol style="list-style-type: none"> 1. Duties and tasks relative to the agreed training plan. 2. Student's performance on assigned responsibilities and work habits. 3. Quality and quantity of work expected and performed. 4. Student's attitude toward the job, employer, co-workers, etc. rewards, criticism, and disciplinary action. 5. Safety conditions. 	<ol style="list-style-type: none"> 6. Validation of the student's work hours including punctuality and regularity of attendance. 7. Student's rotation through different job experiences, insuring that they are diverse, rigorous, and progressive. 8. Student's preparation for position/job change or advancement. 9. Additional opportunities for involvement in the Cooperative Education program. 10. Additional opportunities for partnering with Career and Technical Education, i.e. competition judge, resource speakers.
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Student's Name _____ Job Title _____
 Training Station/Agency _____ Supervisor _____
 Contact Person (*today's visit*) _____ Date: _____

Purpose of Visit: ☐ Student Observation ☐ Student Evaluation ☐ Counseling
 ☐ Problem Resolution ☐ Other _____

This form must be completed each month for training station/agency visits. Record observations, actions to be taken, and recommendations. Identify specific strengths and needed improvements.

General Observations:

Student Activity During the Observation:

Student Conference/Comments:

Training Mentor Conference/Comments:

Cooperative Education Teacher-Coordinator's Overall Comments On This Visitation:

Signature: _____
 (Cooperative Education Teacher-Coordinator)