

# **THE SOUND SCHOOL REGIONAL VOCATIONAL AQUACULTURE CENTER**

## **COOPERATIVE PLACEMENT FRAMEWORK**

The Sound School Regional Vocational Aquaculture Center  
60 South Water Street  
New Haven, CT 06519  
203-946-6873

STUDENT'S NAME: \_\_\_\_\_

CLASS NAME: \_\_\_\_\_

PLACEMENT SITE: \_\_\_\_\_

DATE OF APPLICATION: \_\_\_\_\_

SUBMITTED TO: \_\_\_\_\_

**THE SOUND SCHOOL REGIONAL VOCATIONAL  
AQUACULTURE CENTER**

**APPLICATION FORM FOR COOPERATIVE PLACEMENT**

Student Name: \_\_\_\_\_

Graduation Date: \_\_\_\_\_

Home Address: \_\_\_\_\_

\_\_\_\_\_, Connecticut 06 \_\_\_\_\_

Parent/Guardian Name(s) \_\_\_\_\_

\_\_\_\_\_

Home Telephone: \_\_\_\_\_

Daytime Telephone: \_\_\_\_\_

SOE Developer: \_\_\_\_\_

Office Telephone: (203) 946-6873

Class Instructor: \_\_\_\_\_

Class Title: \_\_\_\_\_

Cooperative Site: \_\_\_\_\_

Site Address: \_\_\_\_\_

\_\_\_\_\_, Connecticut 06 \_\_\_\_\_

Employer's Name: \_\_\_\_\_

Employers Telephone: \_\_\_\_\_

Employer's Fax: \_\_\_\_\_

## Cooperative Placement

Cooperative Placement is an avenue that is available to students (generally Seniors) to earn credit, this is non-paid. It is viewed as an extremely useful and productive means for students to experience the “hands on” approach to learning that is so much a part of Vocational Agriculture education.

The proposal for Cooperative Placement must be approved and sign by the:

***Please note #1 must be completed first.***

1. Guidance Counselor – to include the number of academic credits
2. School Principal
3. Aquaculture/Agriculture Coordinator
4. SOE Developer
5. Class Instructor
6. Student’s Parents
7. Training Site Supervisor
8. Student

**All necessary and appropriate paperwork must be signed and submitted before the Cooperative Placement may begin.**

All parties involved must realize that participation in the Cooperative Placement Program is a student’s privilege and not a student’s right. Therefore non-compliance to any of the agreed upon terms is grounds for dismissal from the Cooperative Placement Program.

It shall be agreed that parties participating in this initiative will not exclude students from participation in, denied benefits of, or otherwise discriminate against, including employment, on the basis of race, color, religious creed, sex, age, national origin, ancestry, marital status, sexual orientation, past/present history of mental disorder, learning disabilities and/or physical disability.

Cooperative Placement should be viewed as a challenge representing the student’s best efforts. While the student is gaining personal experience, it should be remembered that the student is also representing The Sound School and the CITY OF NEW HAVEN’s Public Schools. The student will be supported by The Sound School Staff, but ultimately, they are responsible for achieving their Cooperative Placement Experience goals and the completion of the required class work to receive course credit for their efforts.

**EMPLOYER/TRAINING SITE AGREEMENT**  
**Cooperative Placement**

The Employer/Training Site Agrees:

1. To assign a supervisor/mentor who will work with the Course Instructor or SOE Developer to develop the student's Plan of Activities and in evaluating student progress.
2. To evaluate the student in a monthly consultation with the Course Instructor or SOE Developer.
3. When applicable, that the status of the Cooperative student intern shall be made known to union officials and/or other members of the collective bargaining unit. The bargaining agency shall concur with the placement of the student.
4. That the Cooperative Placement Experience shall abide by any State or Federal Occupational Safety and Health Act (OSHA) standards.
5. To prohibit the student from working if they do not attend school that day.
6. To consult the SOE Developer/Course Instructor if work related learning concerns arise.

Cooperative Experience Location:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Name & Title of on-site supervisor:  
\_\_\_\_\_

We realize that the total Cooperative Placement Experience exposes the student to many aspects associated with the world of work. Would you please describe any specialized or specific training your work site will offer the student.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## **Student Agreement**

### **Cooperative Placement**

The Student Agrees:

1. To compile and complete a working resume prior to Cooperative Placement.
2. To adhere to all the rules and regulations of the business and to act in a professional manner.
3. To attend classes each school day as a prerequisite to internship, unless prior arrangements have been made with the employer, Course Instructor or SOE Developer. Notice of such special conditions shall also be conveyed to The Sound School office in a timely fashion.
4. To inform the employer, SOE Developer and The Sound School office in the event an illness or emergency prevents site attendance. Advanced notification of an absence should be given, if possible.
5. To make available to the SOE Developer records of total hours worked and other such data as deemed necessary to document compliance with Vocational Agricultural Education Standards.
6. To meet regularly with the Course Instructor and/or other Sound School staff members as deemed necessary by the Course Instructor.
7. To receive approval from Course Instructor and SOE Developer prior to altering the Cooperative Placement agreement in any fashion.
8. To maintain and submit a Cooperative Placement log book on a regular basis.

Special Topics students shall be required to write and complete a final paper to receive full class credit for the Cooperative Placement Experience. The paper may be tailored to fit each individual's Cooperative Placement Experience.

I have read and fully understand what is expected from me in my Cooperative Placement Experience.

Student's Signature \_\_\_\_\_

Date: \_\_\_\_\_

## **Parental / Guardian Agreement Cooperative Placement**

The Parent/Guardian Agrees:

1. To grant permission for the student to participate in the Cooperative Placement.
2. To support the attendance policy and record keeping practices associated with the Cooperative Placement Experience Program.
3. To encourage and support the student's efforts to succeed and realized the goals they have expressed in relation to the Cooperative Experience Program.
4. To encourage and reinforce the concepts of responsibility, commitment and professionalism in both the classroom and at the training site.
5. To allow the student to leave The Sound School campus in order to participate in the off-site training associated with the Cooperative Experience Program.
6. To, whenever possible, facilitate the student with the arrangements and requirements of travel, both to and from the training site. Parents should always be aware of their child's Cooperative Experience schedule.
7. To support the student in meeting the terms of the Cooperative Experience Program and participate in the Co-Op Experience work site partnership.
8. To meet with the Course Instructor, SOE Developer, and/or other Sound School personnel involved with the student's Cooperative Experience Program, should the need arise.

We(I) have read and fully understand what is expected from us(me) in the Cooperative Placement Experience.

Parent/Guardian(s) Signature \_\_\_\_\_

\_\_\_\_\_

Date \_\_\_\_\_

## SPECIAL TOPICS

### Cooperative Placement Experience Agreement Package

Those students involved in a Cooperative Placement Experience while in Special Topics class is asked to return this sheet to the class instructor.

Each individual involved in the Cooperative Placement will be asked for their signature to indicate their acceptance of the terms and conditions of the agreement.

Each person should have read the information in this framework, asked questions and received appropriate responses that satisfied their inquiries. It is important that the members involved in this Cooperative Placement have asked and will continue to ask questions (realizing that there can be no true learning without question).

Failure to do so may interfere with one of our major objectives;

*Which is the enhancement of the student's abilities and understandings of real world practices, as applied in the professional workplace, through hands on experience.*

I have read and I understand the contents of the Cooperative Placement Experience Agreement Package.

Signature of Student \_\_\_\_\_ Date \_\_\_\_\_

Signature Parent/Guardian(s) \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_

Signature of Employer/Trainer \_\_\_\_\_ Date \_\_\_\_\_

Signature of Course Instructor \_\_\_\_\_ Date \_\_\_\_\_

Signature of Guidance Counselor \_\_\_\_\_ Date \_\_\_\_\_

Signature of SOE Developer \_\_\_\_\_ Date \_\_\_\_\_

Signature of Aquaculture/  
Agriculture Coordinator \_\_\_\_\_ Date \_\_\_\_\_

Signature of Course School  
Principal \_\_\_\_\_ Date \_\_\_\_\_

# Sound School Agreement Cooperative Placement

The Sound School Agrees:

1. To offer a curriculum for the student that enriches learning and advances the students academic skills through course work related to Cooperative Placement Experiences.
2. To award a grade and credit(s) toward graduation for the Cooperative Placement Experience based on the quality of each student's work experience and the completion of both the log book and the final paper.
3. To, in cooperation with the Cooperative Placement site, observe the student's work based performance systematically throughout the work year.
4. To have school support staff available for regular meetings with the student.
5. To work with the student and the on-site personnel to design an internship plan for the student.
6. To provide services for the student that allow them to fulfill their VoAg certification requirements, develop a career plan and portfolio and/or to ready themselves for post secondary education.

## GUIDANCE

Signature of Guidance Counselor \_\_\_\_\_ Date \_\_\_\_\_

As of \_\_\_\_\_, \_\_\_\_\_ has \_\_\_\_\_ credits on  
*Date* *Student Name* *#*

file. In order to graduate with an Aquaculture/Agriculture completion certificate the student must have  
acquired 24 academic credits, this **does not** include the students SOE credits.

Signature of Course Instructor \_\_\_\_\_ Date \_\_\_\_\_

Signature of SOE Developer \_\_\_\_\_ Date \_\_\_\_\_

Signature of Aquaculture  
/Agriculture Coordinator \_\_\_\_\_ Date \_\_\_\_\_

Signature of Course School Principal \_\_\_\_\_ Date \_\_\_\_\_