



Off-Campus Work Experience

Name: _____ Grade: _____

Phone: _____ Advisor: _____

Proposed Off-Campus Work Experience Plan

Employer: _____ Employer Phone: _____
(company / department)

Supervisor: _____ Work is _____ paid _____ volunteer

Address: _____ Date employment begins: _____

Give a brief description of your duties:

I understand and agree to the following terms:

1. Application for Off-Campus Work Experience must be submitted and approved by the Academic Committee before work begins.
2. No academic credit is earned; however the Pacific Union Conference work experience requirement for graduation is waived.
3. Documentation of at least 50 hours of work (check stubs, time cards, or official letters of verification of volunteer work) must be submitted to the Work Experience Coordinator no later than registration of the junior year.
4. If the Off-Campus Work Experience Plan is not approved and completed (100 hours submitted) by registration of the junior year, the student agrees to enroll in the Work Experience Class and volunteer work at La Sierra Academy as an aide, tutor, office or maintenance worker.
5. Hours will not be used for community service credit at La Sierra Academy.

Student's Signature Date Parent's Signature Date

Office Use Only _____

Date Approved: _____

Verification of Hours: _____ By: _____ Date: _____

