



New Jersey Structured Learning Experience (SLE) Sample Individualized Student Training Plan

For All Paid/Unpaid Internship, Volunteer, Community Service, Service Learning & School-Based Enterprise SLEs

Student Name: _____ **Career Cluster®:** _____

District/School: _____ **SLE Start Date:** _____

Business/Agency: _____ **SLE End Date:** _____

Workplace Experience SCED code: _____

General description of SLE:

In addition to safety training provided by the school, the SLE student should receive:

Business/agency's new employee orientation training.

Business/agency's new employee safety and health training.

Tools, equipment, and personal protective equipment orientation, if applicable, to be used as part of the SLE.

Note: All learning objectives must align to [New Jersey Student Learning Standards](#) (NJSLS). Each learning objective below includes suggested standards to address. Please attach additional pages, as necessary, for each learning objective.

Learning Objective: Worksite Safety and Health Practices

[\(NJSLS, Career Ready Practices \(CRP\), Standard 9.3 Career and Technical Education](#) or other recognized industry standards)

Standard addressed:	Activities that will support the standard:	How will attainment be assessed:	Met/Unmet:

Learning Objective: Career Interests/Planning Goals

[\(NJSLS, Career Ready Practices \(CRP\), Standard 9.2 Career Awareness, Exploration, and Preparation\)](#)

Standard addressed:	Activities that will support the standard:	How will attainment be assessed:	Met/Unmet:

Learning Objective: Occupational/Technical Learning

(NJSLS, [Career Ready Practices \(CRP\)](#), [Standard 9.3 Career and Technical Education](#) or other recognized industry standards)

Standard addressed:	Activities that will support the standard:	How will attainment be assessed:	Met/Unmet:

We understand that the SLE and worksite are consistent with “*Guidelines for Vocational Education Programs for Eliminating Discrimination and Denial of Services on the Basis of Race, Color, National Origin, Sex and Disability,*” as well as with federal requirements of nondiscrimination in education programs or activities receiving federal financial assistance. 34 C.F.R. §104.4, §106.38 (a)(b), and §100.3 (c).

We have reviewed and are in agreement with the description, learning objectives, activities, and assessments, and assignment of grade and if applicable course credit, of this school-sponsored SLE. We agree to complete all paperwork and maintain all documentation required for this SLE. The SLE Coordinator or Cooperative Education Coordinator and the worksite mentor agree to regularly monitor the learning objectives set forth in this individualized student training plan. The student agrees to uphold their responsibilities in compliance with this individualized student training plan.

SLE Coordinator

Signature

Date

Worksite Mentor

Signature

Date

SLE Student

Signature

Date

Parent/Guardian

Signature

Date

School Administrator (Optional)

Signature

Date

Attach this completed form, the approved district board of education policy for the provision of health, safety, and medical emergency services (N.J.A.C. 6A:16-2.1 (a)) and if applicable the completed employment certificate (working papers) to the Business/Agency Agreement for this SLE.