

CPI

Central Pennsylvania Institute of Science and Technology

540 N. Harrison Road, Pleasant Gap, PA 16823

Phone: 814-359-2793

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Dr. Richard Makin, President

MaryAnn Volders, Director of Secondary Education

Krista Renzo, Cooperative Education Coordinator

EMPLOYER COOPERATIVE TRAINING AGREEMENT

Student: _____	D.O.B.: _____	Age: _____
Street Address: _____	City: _____	State/Zip: _____
Phone: _____	CPI Program: _____	School: _____

Employer: _____	Phone: _____
Street Address: _____	City: _____ State/Zip: _____
Supervisor: _____	Worker's Comp. #: _____
Start Date: _____	End Date: _____ Pay Rate: _____

The Employer agrees:

1. To provide work experience such as are common to apprentices and learners in the trade, under the direction of an experienced worker.
2. To abide by all State and Federal regulations, child labor laws, minimum wage and worker's compensation requirements as they apply to this student.
3. To permit the school's representative to visit the student at his/her place of employment for supervision and checking.
4. To report each day of absence during the work period to CPI at 814-359-2793.
5. To provide safety instruction and enforce safety rules throughout the employment period.
6. To perform periodic evaluations on the student's job performance on forms provided by the school.
7. To contact the Co-op Coordinator prior to laying off or terminating the student or when any problem arises with the student.

We the undersigned agree to the conditions and statements contained in this agreement.

_____	_____	_____	_____
Student	Date	Employer	Date
_____	_____	_____	_____
Parent/Guardian	Date	Co-op Coordinator	Date