

Application Date: _____



Externship Packet | Iowa Central Career Connections

Application Checklist

Complete the following checklist before returning to Iowa Central Career Connections.

You must complete the entire application in **blue or black ink**, attach resume, the Educator Recommendation Form and the Participation Release Form. Return the completed application to your principal or superintendent by the session deadline to be considered for a personal interview.

- I have attached:
 - A resume or resume worksheet that highlights my abilities/skills, extracurricular activities, experience, accomplishments, and advanced coursework
 - Completed Participation Release Form.
 - My application has been reviewed and approved by my school principal.
 - I understand I need to present in August on a date TBD about my externship experience.



Externship Application

Applicant Information

Full Name: _____ Date: _____
Last First

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Date of Birth: _____ School: _____ Principal: _____

Job Title: _____

Cell Phone: _____ Email _____

Preferred Method of Communication: Phone E-mail

Emergency Contact Information

Full Name: _____ Relation: _____
Last First M.I.

Daytime Number: _____ Cell Phone: _____

Educational Background

Degree:
University:

Credentials/Endorsements

Summarize your teaching experience if applicable such as grade levels, course taught, number of years taught, etc.

List any professional development, committees, or awards in the last 3 years.

Externship Options

Please list three career choices and a site if you know of one that you are interested in. Please note that this does not guarantee that site will have an externship available.

Career Choice: _____

Requested Site: _____

Career Choice: _____

Requested Site: _____

Career Choice: _____

Requested Site: _____

Rank your desired work environment from 1-4, 1 being least desired and 4 being the most desired.

- Office
- Laboratory
- Manufacturing
- Outdoor

Please list any dates that you are unavailable for an externship.

How far are you willing to travel?

Please list any specialized skills and/or interests you have.

How do you foresee yourself using the knowledge gained from an externship in a classroom setting?

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

I understand that there will be some work associated with the externships such as a journal, lesson plan, and presentation. I understand that transportation to and from the externship will be my responsibility. I also understand that the externship placement will be based upon what business is available and may not be my first choice.

Signature: _____ Date: _____

Educator Participation Release

Name: _____
High School: _____

Media / Marketing Release

I agree to allow my photograph, video tape or motion picture image that includes my name or likeness or any recording that includes my voice to be used in marketing materials to promote the Iowa Central Career Connection program. I understand that my photo/image will only be used in a positive manner in publications, print advertising, promotional materials or any other medium to inform others about the career exploration activities coordinated by Iowa Central Career Connections for K-12 students throughout the Iowa Central region. I give my consent to have an Iowa Central Community College staff member contact me at a future date for marketing purposes if needed.

YES – I will allow my image/comments to be used by Iowa Central Career Connections.

NO- I will not allow my image/comment to be used.

Signature: _____ Date: _____

Participation Release

I recognize that work-based learning opportunities of this nature have a risk of lost or stolen property, injury or even death during transportation to, from, on-site and during the activities. I waive any and all claims of liability arising from my participation in this opportunity, including claims against the following parties (and their employees, contractors, and volunteers): Iowa Central Career Connections, Iowa Central Community College, the school and school district that I work for, and the employer who hosted the work-based learning opportunity.

I agree that participation in this work-based learning opportunity does not create an employer/employee relationship between the place of learning and the educator. We understand and agree that no employer/employee relationship exists as a result of my participation in work-based learning. We further agree that I am not and will not be entitled to any type of unemployment benefits, workers compensation benefits, and/or other employee rights or entitlements because of participation in this work-based learning opportunity, because I am NOT an employee.

I agree to defend, hold harmless, and indemnify Iowa Central Career Connections, Iowa Central Community College, the school and the school district that I work for, and the employer who hosted the externship (and their employees, contractors, and volunteers) from and against any and all claims of liability that derive from claims that I make against any other party arising from this work-site opportunity.

Signature: _____ Date: _____

Iowa Central Career Connections provides equal opportunity to all persons regardless of sex, race, age, creed, color, national origin, religion, sexual orientation, marital status or disability. The Mission of Iowa Central Career Connections is to develop our future workforce by connecting business and education in relevant, work-based learning activities for 9-12 students and teachers in our region.

Externship Agreement

This agreement is to establish and create acknowledgement of the guidelines of the externship program. The guidelines listed are to make externs aware of the obligation that they are to fulfill and create a partnership with Iowa Central. It is understood that if accepted, the extern will be required and obligated to meet the following criteria of the program. Failure to comply with any of these guidelines will result in dismissal from the externship program.

1. Externs understand that they will be placed in only one business for one week. There will not be multiple placements given unless a business cannot accommodate an extern for a week.
2. The committee has final say about placement and will not change a placement after it has been finalized by Iowa Central. The committee will place an emphasis on placing educators in jobs that are in demand in our area and where they see fit for placement based on their goals of the program. For example, you could be an English teacher placed in a manufacturing setting to create Standard Operating Procedures (SOP's) for a week.
3. All required paperwork must be submitted prior to the start date of their externship. If the paperwork is not turned in the externship will be considered invalid.
4. If an extern does not communicate after three attempts by the Iowa Central staff, the extern will be dropped from the program.
5. The presentation date is mandatory and no exceptions will be given. Presentations need to be completed in order to receive payment.
6. The extern understands that they are not only representing themselves at their work site but they are also representing their school district and Iowa Central. If Iowa Central hears of any difficulties from the extern, the school district will be notified.
7. The extern learner will keep regular attendance at the work site; he/she will notify the school where he/she works, Iowa Central, and employer if unable to report. Failure to report to the externship without notification to all parties involved will result in termination of externship program.
8. The extern will show honesty, punctuality, courtesy, a cooperative attitude, proper health and grooming habits, abide by the company's policies/regulations, and demonstrate a willingness to learn.
9. The extern will consult Iowa Central about any difficulties arising at the site immediately.
10. The extern will conform to the rules and regulations of the site.

By my signature, I acknowledge that I have read and will abide by this agreement. I also acknowledge that failure to comply with this agreement will result in my dismissal of the program.

Signature: _____ Date: _____