

**Toledo High School
Junior Job Shadow
Parent Permission Form**

As part of Toledo High School's culminating portfolio project, we are requesting that your son/daughter participate in a job shadowing experience. Students will be allowed to miss a portion of the school day, with parental permission, to participate in this experience. Students are welcome to do their job shadowing after school or on the weekend, but they must get approval from their advisory prior to their scheduled job shadow.

Your son/daughter has chose to job shadow: _____
(Person and Job Type)

The job shadow will occur on the following date: _____

As part of the job shadow, the student will be required to interview the person they are job shadowing and complete a time-sheet. Prior to interviewing the person, the student will submit to their advisor a list of questions that they will ask. Students will be required to turn these two documents in as part of their portfolio. We will ask that students share this experience as part of their student-led conference with their parent(s).

Signature of Parent/Guardian

Date

On the next form, you will find the complete data about the person your son/daughter is going to job shadow.

***Attendance Officer Approval: _____

***Principal's Approval: _____

**Toledo High School
Junior Job Shadow
Workplace Permission Form**

I agree to have _____ spend three hours with me
at _____ for the purpose of
(place where the job shadow and interview will occur)

of observing my job and interviewing me. At no time will the student be required to participate in any aspect of the actual work I perform.

Name: _____

Phone number where you can be reached: _____

Address where the job shadow will occur: _____

Type of job you perform: _____

In general terms, what can the student expect to observe? _____

Signature of person to be shadowed

**Toledo High School
Junior Job Shadow
Interview Questions**

Questions asked	Response
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	

**Toledo High School
Junior Job Shadow
Verification Form**

Student Name: _____

Job Shadow Contact:

Name: _____

Title (Job): _____

Phone Number: _____

Date & Time of Job Shadow: _____

I have attached the following documents:

_____ Parent Permission Form

_____ Workplace Permission Form

_____ Observation Time Sheet

_____ Interview Questions

_____ Photocopy of Thank You Note

Student Signature

Date

Advisory Teacher Signature

Date