

Saratoga Springs City School District
3 Blue Streak Blvd.
Saratoga Springs, NY 12866
518-583-4700

Memorandum of Agreement

This establishes an agreement between the Saratoga Springs City School District and Business:

Business Name: _____ Contact Name/Job Coach: _____
Address (Street, City, State and Zip Code): _____
Phone Number: _____ Fax Number: _____
E-Mail Address: _____ Website: _____

In relation to the work based learning experience for:

Student Name: _____ Date of Birth: _____
Address (Street, City, State and Zip Code): _____
Phone Number: _____ E-Mail Address: _____
Home School District: Saratoga Springs City School District
CARE Program: _____ Session: AM PM
Emergency Contact: _____ Emergency Phone Number: _____

- The work based learning program/experience will comply fully with ALL applicable New York State and Federal labor laws, including workers compensation laws and those specific to prohibited occupations, as well as with New York State Education Department laws and regulations.
- The employer, through a designated Job Coach who is an authorized employee of the business, and a certified Coordinator of Work Based Learning Programs for Career Development will supervise the work based learning experience.
- The employer agrees to notify the WBL Coordinator when there is a serious situation involving the student.
- The student will be evaluated by the Job Coach during the program and must maintain satisfactory standards of performance to continue in the experience. The Job Coach will share evaluations of the student with the WBL Coordinator.

Type of WBL Experience: CO-OP Paid CO-OP Unpaid CEIP GEWEP WECEP Other _____

Start Date: _____ End Date: _____ Days of Week: M Tu Wed Th F Sa Su

Hours of Work: _____

Student Signature: _____ Parent/Guardian Signature: _____

Job Coach/Employer Signature: _____ Instructor Signature: _____

WBL Coordinator Signature: _____ X _____
Principal Signature: _____

Special Education Consultant Teacher Signature (if applicable): _____

The School District does not discriminate in its programs or activities on the basis of, as applicable, actual or perceived race, color, sexual orientation, national origin, religion, age, economic status, marital status, veterans' status, political affiliation, domestic victim status, use of a guide dog or service dog, disability or other classifications protected under federal or state law and provides equal access to the Boy Scouts and other designated youth groups. The compliance officer is Name/Title and is available at the School District Name, Address, E-Mail and Phone Number.

