

# Job Shadowing Kit



A job shadow experience is literally spending time “in the shadow” of a person doing his or her job. It immerses each student in the world of work, where they can get first-hand information about job skills and careers. By bringing students into the workplace to see a professional at work, very real and tangible options come alive for them. Job shadowing creates a critical link between education and success. This helps students not only visualize themselves in that work environment, but it also empowers them to identify what educational choices will coincide with that career path.

The items listed below are **REQUIRED DOCUMENTATION** that is to be completed **BEFORE** you arrive at the Job Shadow site. If you are missing any of these documents, an employer will turn you away. When you receive your placement email and confirmation, print it out and make sure it accompanies you to the Job Shadow appointment along with the five forms identified below.

1. **Student Expectations & Responsibilities**
2. **Student Confidentiality Statement**
3. **Parent Permission Form**
4. **Talking Points (Guideline of questions for students to ask during the job shadow)**
5. **Employer Evaluation**

After your job shadow experience, you will be expected to complete a **student evaluation** and write a **thank you note** to your Job Shadow Host.

**Your job shadow host may have additional documentation required for their organization. These are IN ADDITION to the above forms:**

## **Hospitals:**

- Confidentiality Agreement
- Liability Waiver
- TB Test
- Flu Vaccination
- Photo ID

**Clinic:**

- Clinic Confidentiality Agreement
- Compliance Facts
- Confidentiality Facts
- Release of Liability
- Safeguarding Protected Health Information Form
- TB Test
- Flu Vaccination

**Emergency Services:**

- Ride Along Agreement
- TB Test

NOTE: Background Check Portion of Agreement waived

**Police Department:**

- Police Department Confidentiality & Background Agreement
- Release of Indemnity

**Fire & Rescue:**

- Fire Department Confidentiality Agreement
- Indemnity Agreement

NOTE: Make sure these are printed on white paper, back to back, not 2 pages stapled.

**Veterinary Clinic:**

- Confidentiality Statement
- Release Form



## **Student Expectations and Responsibilities**

- **Punctuality**

- Show up on time – Plan to arrive 10 – 15 minutes early
- If you have to cancel, you are responsible for making the call to the business contact person and your instructor. You can find this information in the placement email.

- **Professional Conduct**

- Smile and make eye contact
- Use a firm handshake and friendly greeting
- Be attentive—avoid slouching or shuffling
- Speak distinctly and pleasantly – avoid slang
- Bring some prepared questions with you (see Talking Points) so you can ask informative questions of your Job Shadow host

- **Professional Dress & Grooming**

- Wear clean and neat clothing – dress appropriately for where you are doing your Job Shadow
- Jeans are only allowed if appropriate for the workplace
- Clean shoes, laces tied, appropriate outfit (no open toe shoes)
- Modest jewelry
- Hair must be clean, styled or combed (facial hair must be clean, well groomed, and neatly trimmed)
- Proper personal hygiene
- NO strong scents (it is best if you abstain from wearing perfume or cologne during your shadow)
- NO tee shirts with logos, hats, or shorts
- NO tight pants or extremely baggy, No underwear showing and NO tight or short skirts, revealing necklines or waists – tops need to cover shoulders, back and waist.

**\*\*If you are not appropriately dressed, the employer will ask you to leave\*\***

***Your behavior and appearance throughout the job shadowing experience is a reflection of your character, your family, your school, and your school district. Make yourself and others proud of your efforts. Please remember, this is a GIFT from our community.***

I \_\_\_\_\_, have read the above protocols and agree to all conditions outlined.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



## **Student Confidentiality Statement**

Montana VRBS welcomes you to the job shadowing experience and wants you to find it beneficial to your future work endeavors. During your time in your respective job shadow, you will be observing student/patient/clients and have limited access to various student/patient/clients' information. It is very important that all student/patient/clients are viewed in a confidential manner; therefore, all student/patient/client information must be held in the strictest confidence. By State Statute, Montana protects this information, making it a criminal offense and/or subjecting anyone improperly releasing patient information subject to civil penalties.

All members of the job shadow program must agree to the confidentiality statement below:

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**Date:** \_\_\_\_\_

**I \_\_\_\_\_ will abide by the laws of the State of Montana and will keep all student/patient/client information confidential while participating in the job shadow experience.**

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
VRBS Witness Signature

\_\_\_\_\_  
Job Shadow Location



## **Parent Permission Form**

Dear Parent(s):

During the school year, if a student is eligible, they have the opportunity to shadow a career that is of interest to them. Participation in the career experience is part of specific course curriculum. It is an excellent approach to educating the students as it enhances their learning experience. Participation in these experiences means that the School District or VRBS will not always provide transportation.

In order for your child to participate in this off-campus activity, he or she may choose to drive, ride with another student or you as his/her guardian may transport him/her. Please read the following consent form, complete, and sign it before returning it to the instructor. If you have any questions, please feel free to contact your son or daughter's VR counselor.

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1. I give permission for my son/daughter (name) \_\_\_\_\_ to drive to "on-site" or field trip projects in connection with his/her participation in the Job Shadow Program. This permission includes the following means of transportation (please SIGN ALL that apply.)

\_\_\_\_\_ Drive his/her own vehicle

\_\_\_\_\_ Drive other students in his/her vehicle

\_\_\_\_\_ Ride in a vehicle driven by another class member

\_\_\_\_\_ Ride with a parent/guardian of another student

\_\_\_\_\_ I (parent/guardian) will transport

2. If my son/daughter will be driving to and from "on site" projects or field trips, I certify that he/she has a valid driver's license and the vehicle which he/she will be driving has and will have minimum liability insurance as required to Montana Law.

Parent/Guardian \_\_\_\_\_ Date: \_\_\_\_\_

Adapted with permission from Great Falls Public Schools.



## **TALKING POINTS**

To be completed by the student **DURING** the job shadow. Interview your host using the questions below. Write your host's responses in the space provided. Feel free to ask additional questions that may come to mind while you are there.

Student Name: \_\_\_\_\_

Job Shadow Site: \_\_\_\_\_

Career/Occupation: \_\_\_\_\_

Host's Name: \_\_\_\_\_

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1. How would you describe a typical day at your job?  
*Do you work alone or with a team?*  
*What is the stress level?*
2. What do you like most about your job? What do you like least?
3. What education and/or training do you need for this job?
4. What is the salary range for various levels in this field?
5. What high school subjects should I take to prepare for a career in this field?
6. What personal qualities are most important to be successful in this career?
7. How has technology affected this job?
8. How do you see jobs in this field changing in the next five – ten years?
9. How did you get your job (testing, interview, word of mouth...)?
10. What advice would you give someone who is thinking about your career?
11. If you could do things over again, would you choose the same path for yourself (why - why not)?

Make sure to thank your host for this opportunity and his/her time before you leave the job site!

## **Employer Evaluation**

**To be completed by the Job Shadow Host:** *Please evaluate the student's performance during their job shadow on the grading rubric below. Return the completed rubric to student in sealed envelope before the conclusion of the job shadow. Thank you!*

### **Job Shadow Grading Rubric**

<b>Component</b>	<b>Excellent 4</b>	<b>Good 3</b>	<b>Fair 2</b>	<b>Needs Improvement 1</b>	<b>Score</b>
<b>Punctuality</b>	Arrive early for job shadow	Arrive on time for job shadow	5-10 min. late; called to inform host late	More than 10 minutes late and/or late and did not call to inform host	_____/4
<b>Attitude</b>	Cheerful, positive, and outgoing	Positive but reserved	Occasionally negative and somewhat inattentive	Frequently negative and/or unengaged	_____/4
<b>Enthusiasm/Interest</b>	Eager to learn asked appropriate questions	Moderate level of participation	Minimal level of participation	Uninterested, little effort to interact	_____/4
<b>Courtesy</b>	Consistently displayed courteous behavior towards staff and patients/clients	Frequently displayed courteous behavior towards staff and patients/clients	Occasionally displayed courteous behavior towards staff and patients/clients	Student lacked courteous behavior	_____/4
<b>Proper Attire</b>	Properly dressed including clothes, grooming, jewelry, fragrance	1 item needed attention	2 items needed attention	3 or more items needed attention	_____/4

**TOTAL** \_\_\_\_/20

**Additional Comments:**

**Signature of Host:** \_\_\_\_\_