



A+ JOB-SHADOWING APPLICATION

FINAL DUE DATE FOR THIS APPLICATION: Prior to the shadowing experience, turn this Application in to the A+ Office so that the coordinator may retain a copy for the student's file.

Job-Shadowing is an opportunity for you to spend a day with an individual in a chosen occupation in order to become familiar with the duties and physical setting of that career. Don't be afraid to think outside the box when you are choosing your Job-Shadow placement.

TO BE COMPLETED BY STUDENT:

Student Name: _____

Student Address: _____

Student Phone Number: _____

Students' High School (circle): Central North South West Fern Ridge

TO BE COMPLETED BY PERSON BEING SHADOWED

(This person may not be related to the student)

Name of Person Being Shadowed: _____

Title: _____

Career Cluster/Industry: (Please check one)

- | | |
|---|---|
| <input type="checkbox"/> Agriculture, Food and Natural Resources | <input type="checkbox"/> Hospitality and Tourism |
| <input type="checkbox"/> Architecture and Construction | <input type="checkbox"/> Human Services |
| <input type="checkbox"/> Arts, Audio Visual Technology and Communications | <input type="checkbox"/> Information Technology |
| <input type="checkbox"/> Business, Management and Administration | <input type="checkbox"/> Law, Public Safety, Corrections and Security |
| <input type="checkbox"/> Education and Training | <input type="checkbox"/> Manufacturing |
| <input type="checkbox"/> Finance | <input type="checkbox"/> Marketing, Sales and Service |
| <input type="checkbox"/> Government and Public Administration | <input type="checkbox"/> Science, Technology, Engineering and Mathematics |
| <input type="checkbox"/> Health Science | <input type="checkbox"/> Transportation, Distribution and Logistics |

Name of Business:

Mailing Address (Street, City, State and Zip Code):



Actual Location of Job Shadow Site (If different from above mailing address):

Phone: _____ Extension: _____

Fax Number: _____

E-Mail Address:

Date of the Job Shadow: _____

Student will shadow you from 8:00 a.m. until 3:00 p.m.

YES

NO If no, please indicate an alternative time period _____

Additional Forms required from the student include the following

They are attached? YES NO

Brief Job Description:

Detailed Directions to Site for Student:

Detailed parking instructions (including costs):

Where is student supposed to report on shadow date?



Lunch arrangements (including approximate cost)

Dress Code for Student (Please Check One):

- Business Casual (Dress Slacks)
- Casual (Jeans, Tennis Shoes)
- Professional (Dress, Suit)
- Other (Please Specify):

Signature of Job Shadow Person (Your signature indicates that you have agreed to have this Parkway student job shadow you on the stated date).

Print Name: _____

Signature: _____ Date: _____

If you have any questions or concerns, please contact the A+ Coordinator in the corresponding building listed below:

Parkway Central

Susan Byergo

369 N. Woods Mill Rd

Chesterfield, MO 63017

(314)-415-7916

Parkway North

LuAnn Fallahi

12860 Fee Fee Road

St. Louis, MO 63146

(314)-415-7695

Parkway South

Amy Belding

801 Hanna Road

Manchester, MO 63021

(314)-415-7785

Parkway West

Jeff Duncan

14653 Clayton Rd.

Ballwin, MO 63011

(314)-415-5527

Fern Ridge

Mike Prange

13157 Olive Spur Road

Creve Coeur, MO 63141

(314)-415-6908



A+ JOB-SHADOWING THINGS YOU SHOULD KNOW...

1. Look at your individual job shadow application. If you are unclear about any part of the instructions, call your shadow site to verify the shadow day, the exact location of the office/business, where you enter, parking details, etc. The phone number to the shadow site is on the application. Keep this instruction sheet until your shadowing day. It also has the address of your contact person. You can use this when writing your thank-you letter. It is a good idea to take a “practice run” to your shadow site prior to your actual visit. **DO NOT LOSE YOUR JOB-SHADOWING APPLICATION.**
2. If you are ill and must be absent on a job-shadow day, please notify the A+ Coordinator in your building. For an excused absence, you will need a note from your doctor. You are also responsible for contacting your job shadow person and telling them you will be unable to attend due to illness.

ON YOUR JOB-SHADOW DAY...

1. Get up early enough to allow sufficient time to get ready and arrive at your job shadow site 15 minutes early. You are expected to dress **PROFESSIONALLY unless you have special arrangements** (See Completed Application). To dress professionally means you may wear dress pants, skirts or dresses. Skirts should be no shorter than *slightly* above the knee. Gentlemen should have shirts tucked in and should not sag. Do not chew gum while you are visiting. Look your best because you represent Parkway.
2. Take your “Job-Shadowing Attendance and Comment Sheet” with you on your job shadow day. You are to give this sheet to your supervisor when you arrive and tell him/her that you need it to be completed and returned to you before you leave on your job shadow day. The contact person needs to complete the middle section. Be sure to have this sheet in your hands when you leave.
3. Bring your lunch or money with you to purchase lunch.
4. Some of you may need money for parking.
5. You may take your cell phone, but **do not** have it on during the job-shadowing experience.
6. Complete the bottom half and #1-5 on the “Job-Shadowing Attendance and Comment Sheet” when you get home from your shadow experience on a separate sheet of paper. This sheet is to be returned to the A+ Coordinator in your building **NO LATER than 2 WEEKS AFTER YOUR SHADOW.**
7. Write a personal thank you letter to your contact person **NO LATER THAN 2 WEEKS AFTER YOUR SHADOW.**



JOB-SHADOWING DAYS COMMUNICATION TIPS

Use the following format to communicate with your Job Shadow Contact Person:

- ❖ Hello, my name is _____.
- ❖ I am a student at Parkway _____ High School.
- ❖ I am interested in getting more information about your career.
- ❖ Would you or someone in your (Office, Hospital, School, etc.) be available for me to job shadow for a day or part of a day?
- ❖ I am available to job shadow on _____ (possible dates) _____.
- ❖ I will arrive at _____ am/pm and leave at _____ am/pm.
- ❖ I will be spending the time observing day-to-day operations in your (office, hospital, school, etc.). I hope this experience will help determine my future.
- ❖ I would like to send you the job shadowing application. Is your address _____?
- ❖ If you have any questions or would like more information about the job shadowing program, you may contact the A+ Coordinator at
 - **Parkway North High School:** LuAnn Fallahi; 314-415-7695, dfallahi@parkwayschools.net; 12860 Fee Fee Road, St. Louis, Missouri, 63146.
 - **Parkway South High School:** Amy Belding; 314-415-7785, abelding@parkwayschools.net 801 Hanna Road, Manchester, MO 63021
 - **Parkway West High School:** Jeff Duncan; (314)-415-5527, jduncan@parkwayschools.net 14563 Clayton Rd., Ballwin, MO 63011
 - **Parkway Central High School:** Susan Byergo, (314)-415-7916, sbyergo@parkwayschools.net 369 North Woods Mill Rd., Chesterfield, MO 63017
 - **Fern Ridge High School:** Mike Prange; (314)-415-6908, 13157 Olive Spur Rd., Creve Coeur, MO 63141
- ❖ My phone number is _____ in case you need to contact me.
- ❖ Thank you for your time.