

# Oakland Schools – Oakland Schools Technical Campuses



Campus  
Address, State Zip  
Phone: Number FAX: Number

## Employer Verification of Student Work Hours

|                  |   |           |
|------------------|---|-----------|
| <b>Student:</b>  | <b>Instructor:</b>  | Week of:  |
| <b>Employer:</b> | <input type="checkbox"/> Field Experience – Paid<br><input type="checkbox"/> On the Job Training – Unpaid | Date Due: |

**Student:** Please complete all attendance fields, obtain supervisor’s signature, and return by the due date listed to the campus student placement staff member.

|   | Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday |                  |
|---|--------|--------|---------|-----------|----------|--------|----------|------------------|
| <i>Date</i>                               |        |        |         |           |          |        |          | <i>Total HRs</i> |
| <i>Number of Hours</i>                    |        |        |         |           |          |        |          |                  |
| <i>Start Time</i><br>-<br><i>End Time</i> | -      | -      | -       | -         | -        | -      | -        |                  |

Days absent from work or school: \_\_\_\_\_ Reason for absence: \_\_\_\_\_

**Employer:** Please verify the hours recorded, provide feedback on current work performance, sign and date before returning to student. Complete this section on the student’s current work performance by placing a check mark in the appropriate column using the following scale: **4 - Exemplary; 3 - Satisfactory; 2 - Inconsistent; 1 - Not Yet;** and provide comments when appropriate.

| 4 | 3 | 2 | 1 | Work Performance Trait                    | 4 | 3 | 2 | 1 | Work Performance Trait                         |
|---|---|---|---|---|---|---|---|---|--|
|   |   |   |   | Demonstrates positive attendance patterns |   |   |   |   | Exhibits effective communication with others   |
|   |   |   |   | Meets expected workplace requirements     |   |   |   |   | Ability to prioritize work                     |
|   |   |   |   | Works without prompting                   |   |   |   |   | Works actively to improve knowledge and skills |

Comments: \_\_\_\_\_

**I certify that the hours reported above are true and accurate.**

**Supervisor Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_