



VPHS School Flex Program

Student Contract

I, _____, agree to participate in the VPHS School Flex Program, in which I will be earning high school credit through employment or an internship in the community. This employment or internship is aligned to my ICAP and future career goals. In agreeing to participate, I agree to meet the following criteria throughout my time in the program:

- I will enroll in the Career Exploration and Employability course at VPHS, which will take place 5th hour each day prior to my excusal to my work site
- I will maintain a 95% attendance rate at both my VPHS classes and my employment/internship
- I will remain free from suspensions, expulsions, or dismissal from my employment/internship
- I will provide proof of continued employment through either (a) submission of regular pay stubs to Dr. Goldberg, or (b) submission of regular (biweekly), signed, hours logs to Dr. Goldberg

If I am not able to meet these criteria, I understand that my participation in the School Flex Program will be terminated and my credit will be forfeited.

I will be earning hours through my employment/internship at _____ and will be under the supervision of _____. He/she has been made aware of my participation in this program and its requirements and has shown consent through their signature below.

Supervisor Email

Supervisor Phone Number

Student Signature

Date

Parent Signature

Date

Site Supervisor Signature

Date

Principal Signature

Date