

**Northeast Georgia Health System**

**Youth Apprentice Contract**

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_understand that as a Youth Apprentice at Northeast Georgia Health System, I am representing both \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ High School and NGHS. During my rotations I understand that I will have opportunities to learn more about the health care profession, therefore I will be proactive and seek opportunities to learn new more about each department. I understand if any conflict should arise with a rotation, I will discuss this issue with both my mentor and teacher and work toward a resolution. I will treat NGHS staff, patients, and visitors with courtesy and respect. Since I am representing my school along with NGHS, I will dress according to the Youth Apprentice dress code guidelines, and I will ensure that my ID badge is visible above the waistline at all times during my rotation.

During the school year if I have **any** disciplinary action, I am aware that I will be removed from the Youth Apprentice program. Also, if I am found using my cellular phone during a rotation for any reason, I will be removed from the program. I know that I need to communicate **any** changes in my schedule with my mentor **and** teacher both verbally **and** in writing. I will bring my time sheet every day so my mentor can fill it out accordingly, and I understand that only the times when I am actually present for my rotation will be documented on the time sheet. I understand that this program is for the entire school year if I attend a Hall County School.

I understand that it is a privilege to participate in the Youth Apprentice program, and I plan to conduct myself accordingly.

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Student’s Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 WBL Coordinator Signature Date



**ROTATION TIME REQUEST**

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

# Periods Released from School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Time Frame for Internship (reporting to work): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Include start time and ending times, ex. 2:30pm-4:30pm. Some departments do not allow interns to report until 8:30 a.m. but that is only a few, most allow 8:00 a.m.

Work can only be within the hours of 8am-4:30pm Monday – Friday. You do not have to report every day, but you must get your required hours for WBL each week.

 1 release period = 5 hrs/wk

 2 release periods = 10 hrs/wk

 3 release periods = 15 hrs/wk

Ex. For one release period, work Mon, Wed, Fri from 2:30-4:30 pm = 6 hrs

Any other special notes: