# LEARNING OPPORTUNITY TRAINING AGREEMENT

#### Revision 11.30.2021

Learning opportunities are hosted by providers that serve youth in our community. Identified milestones are designed to promote the professional growth and development of the participant through practical and hands-on tasks, projects, and applications. The participant and the career coach will collaboratively complete this learning agreement, with input from the provider supervisor, to determine the goals and expected professional development of the participant. At scheduled intervals, the career coach will assess what milestones the participant has achieved.

## **CONTACT INFORMATION**

| PROVIDER AGENCY     | LEARNING OPPORTUNITY START DATE | LEARNING OPPORTUNITY END DATE |
|---------------------|---------------------------------|-------------------------------|
| PROVIDER SUPERVISOR | PROVIDER EMAIL                  | PROVIDER PHONE                |
| COACH               | COACH EMAIL                     | COACH PHONE                   |
| PARTICIPANT         | PARTICIPANT EMAIL               | PARTICIPANT PHONE             |
|                     |                                 |                               |

## **LEARNING OPPORTUNITY MILESTONES**

| MILESTONE ACTIVITY               | LEARNING OBJECTIVE   | MEASUREMENT                     | STIPEND | DATE<br>COMPLETED | COACH<br>INITIALS | Payment<br>Requested<br>Date |
|----------------------------------|--|---------------------------------|---------|-------------------|-------------------|------------------------------|
| EverFi Financial Literacy Course | Gain knowledge of common financial skills, such as bank accounts | Email coach proof of completion | \$100   |                   |                   |                              |
|                                  |  |                                 |         |                   |                   |                              |
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IF NEEDED, LIST ADDITIONAL MILESTONES ON PAGE 3

This program financed in part with funds provided through Worksystems, Inc. from the U.S. Department of Labor. This is an equal opportunity employer/program. Auxiliary aids and services are available upon request to individuals with disabilities. To place a free relay call in Oregon dial 711.

# **LEARNING OPPORTUNITY REQUIREMENTS**

| MAX # OF MILESTONES  |                            | MAX AMOUNT OF STIPEND  | \$                        |  |  |
|--|----------------------------|--|---------------------------|--|--|
| Participant may not complete more milestones than listed here. Participant will not be compensated for milestones beyond the number listed here. |                            | The total stipend the participant receives may not exceed the dollar amount listed here. |                           |  |  |
| PARTICIPANT WILL DO REQUIRED WEEKLY CHECK-IN ON:   |                            | PARTICIPANT WILL CHECK-IN USING:   |                           |  |  |
| ☐ Mondays ☐ Tuesdays ☐ Wednesd   | days 🗖 Thursdays 🗖 Fridays | ☐ Email ☐ Text ☐ Phone Call ☐ Bl   | og Response 🚨 Online Form |  |  |
| SPECIAL UNIFORMS, TOOLS & EQUIPME  | NT                         |  |                           |  |  |
| SPECIAL RESTRICTIONS/CONDITIONS  |                            |  |                           |  |  |

Additional special restrictions include compliance with COVID-19 executive orders issued by Governor of State of Oregon; no lobbying or political activities; and no required participation in religious activities.

#### THE PARTICIPANT AGREES TO ACCEPT THE FOLLOWING RESPONSIBILITIES:

- 1. Maintain 90% attendance.
- 2. Check in with Provider Supervisor weekly at designated time using designated method.
- 3. Communicate absences to Provider Supervisor and coach at least one hour prior to scheduled start time.
- 4. Complete no more than the maximum allowable milestones.
- 5. Accurately report completed milestones to Provider Supervisor.
- 6. Participate in check-ins and evaluations required by the Provider Supervisor.
- 7. Report any changes that may affect commitment to this learning opportunity to coach.

### LEARNING OPPORTUNITY AGREEMENT CANCELLATIONS

Failure on the part of the undersigned parties to meet their obligations under this agreement may result in suspension or termination of the agreement. All parties retain the right to terminate this agreement within 10 days of written notice. Agreement may be unilaterally terminated immediately due to lack of funding or violation of any applicable Federal, State, or Local laws or in cases where Worksystems deems it necessary to protect the interests of the participant(s). Termination of this agreement for any cause shall be without prejudice to any obligation or liabilities of either party accrued prior to or because of such termination.

This agreement will not be valid until the Provider Supervisor returns a copy with a signature of approval and an authorized starting date.

| PARTICIPANT SIGNATURE         | DATE | COACH SIGNATURE | DATE |
|-------------------------------|------|-----------------|------|
| PROVIDER SUPERVISOR SIGNATURE | DATE |                 |      |

LEARNING OPPORTUNITY MILESTONES, CONT.

| LEARNING OPPORTUNITY WILL |                    |             |         | DATE      | СОАСН    | Payment<br>Requested |
|---------------------------|--------------------|-------------|---------|-----------|----------|----------------------|
| MILESTONE ACTIVITY        | LEARNING OBJECTIVE | MEASUREMENT | STIPEND | COMPLETED | INITIALS | Date                 |
|                           |                    |             |         |           |          |                      |
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