Unit #2 Title: Navigating the World of Work

Lesson Title: Job Shadowing

Grade Level: 11

Length of Lesson: 55-70 minutes

Mississippi College and Career Readiness Standard:
ELA: RI.9-10.4, RI.9-10.7, RI.11-12.4, RI.11-12.7
ELA: SL.9-10.1, SL.9-10.2, SL.9-10.3, SL.9-10.4, SL.9-10.5, SL.11-12.1, SL.11-12.2
   SL.11-12.3, SL.11-12.4, SL.11-12.5
   L11-12.3, L11-12.4, L11-12.5, L11-12.6
ELA: WHST.9-10.7, WHST.9-10.8, WHST.9-10.9, WHST.11-12.7, WHST.11-12.9
   WHST.11-12.8

American School Counselor Association (ASCA) National Standard:
M 2, M 3, M 4, M 5, M 6
B-LS.1, B-LS.2, B-LS.3, B-LS.4, B-LS.5, B-LS.6, B-LS.7, B-LS.8, B-LS.9
B-SMS.1, B-SMS.2, B-SMS.3, B-SMS.4, B-SMS.5, B-SMS.7, B-SMS.8, B-SMS.9
B-SMS.10
B-SS.1, B-SS.3, B-SS.5, B-SS.6, B-SS.7, B-SS.8, B-SS.9

Materials (include activity sheets and/or supporting resources)
Job shadowing worksheets
Phone contact form
Teacher consent form
Description and checklist
Workplace tips
Thank you letter
Consent participant form
Orientation form
Questions form
Reflection form
Supervision form
List of local businesses and organizations (prepared by counselor)
Counselor information sheet for job shadowing
Enduring Life Skill(s)

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Lesson Measurable Learning Objectives:
The student will complete a job-shadowing experience.

Lesson Formative Assessment (acceptable evidence):
Assessment should relate to the performance outcome for goals and objectives.
Assessment can be question answer, performance activity, etc.
The student will complete forms necessary to participate in job shadowing, complete a job-shadowing experience, and develop a reflection/projection narrative about the implications of job-shadowing experiences for the future.

Lesson Preparation

**Essential Questions:**
How does a job shadowing experience affect a person’s job choice?

**Engagement (Hook):**
Use media (i.e., music, movie clips, etc.) to facilitate discussion on job-shadowing experiences.

Procedures

**Instructor Procedures/Instructional Strategy:**
Note: This strategy is labor-intensive for counselors. The materials that accompany this lesson will help you organize for the adventure.

1. Counselor uses media and/or other sources to engage students in a discussion about job shadowing.

2. The counselor asks students to think about their own interests related to jobs. Students are asked if they would like to know more about certain jobs.

3. The counselor discusses future plans for job shadowing. Job-shadowing packets are distributed to the students and time is allowed for completion of forms.

**Student Involvement/Instructional Activity:**

1. Students will learn what it means to job shadow.

2. Students respond to the counselor’s questions.

3. Students will complete necessary forms and start searching for job-shadowing placement.
Teacher Follow-Up Activities
Teacher could ask students to share some of their experiences during job shadowing. Students could also write a paper on job-shadowing experiences.

Counselor Reflection Notes (completed after the lesson)
Counselor Information Sheet for Job Shadowing

Goal:
The goal is to have the student experience the world of work through job shadowing.

Role:
The role of the student during job shadowing will be to observe an employee for a short period of time to learn about the business, industry, or profession of the employee. The student witnesses firsthand the work environment, employability, and occupational skills in practice, the value of professional training, and potential career options.

Students will:
1. Review the Job Shadowing Choices Checklist
2. Contact the host to set up a time and date for the job shadowing by using the Job Shadowing Choices Checklist
3. Receive and have completed:
   a. Parental Consent to Participate Form
   b. Transportation Form
   c. Classroom Teacher Permission Form
4. Review Workplace Tips
5. Arrive on time
6. Dress appropriately

Students will report to (predetermined) workplaces for a learning opportunity, to experience real-life work in a career field.

During the job shadowing experience, the student observes his/her host, collects relevant information, and asks questions (e.g., “What do you like about your job? What kind of skills or training do I need?”).

Standards and Criteria for Success:
As a result of the job-shadowing experience, the student will be expected to complete some of the following activities:
1. Write a thank you letter (REQUIRED)
2. Complete the Job Shadowing Reflection Form
3. Keep a journal describing the site, the people, the work, and the environment
5. Make an oral classroom presentation or poster presentation on careers represented at the job-shadowing site.
6. Ask workplace employer/supervisor to complete a job shadowing feedback sheet regarding the student participant.
Job Shadowing Choices Checklist

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<th>Future Job Interests</th>
<th>Local Businesses</th>
<th>Telephone Numbers</th>
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1. Contact your first choice for your job-shadowing experience. Introduce yourself and state briefly the purpose of your job-shadowing visit. If they agree to the visit, ask them what date and times would be convenient for them. Write them down and restate the date and time to make sure you have the information correct. If you are not familiar with the place, ask where you should meet them.

2. Thank them for their time and express that you are anxious to meet with them.

Business and person you will spend time with _______________________

Date: _______________________

Times: _______________________

3. Be sure all necessary consent forms are completed:
   a. Parent/Guardian Consent Form
   b. Classroom Teacher Permission Form
   c. Transportation Consent/Agreement

4. Review the Workplace Tips Sheet

4. Go on your job shadow
   a. Use List of Prepared Questions
   b. Leave the Job Shadowing Supervisor Reflection Form at the business and ask for its completion and return

6. Write a thank you note to business (sample letter attached)

7. Fill out the Job Shadowing Reflection Form
Job Shadowing Parent/Guardian Consent Form

Your son/daughter has expressed an interest in participating in a job shadowing experience. He/she will be assigned to a professional/employee who will lead them through their department. They will discuss a typical workday and explore different aspects of working in their field of choice.

PERMISSION TO PARTICIPATE IN JOB SHADOWING:

My child, __________________________________, may participate in job shadowing.

This job shadowing will take place at ____________________________________________
on ___________________________.

I grant permission to photograph my child for identification, promotional, and educational purposes. Should it be necessary for my child to have medical treatment while participating in the job-shadowing program, I hereby give my permission to the personnel to render whatever medical treatment he or she deems necessary and appropriate. Permission is also granted to release necessary emergency/medical history to the attending physician, if needed.

Student’s Name: ___________________________ Phone: ______________

Address: ______________________ City: __________________ Zip: _____

Parent/Guardian: ____________________________________________

Does your child require any special accommodations due to medical limitations, disability, dietary constraints, or other restrictions?

_____ YES  _____ NO

If “yes,” please explain:

Have you signed a transportation agreement form? _____ YES  _____ NO

_________________________________________   ___________________
Signature of Parent/Guardian                                                     Date
Job Shadowing Classroom Teacher Permission Form

The Job Shadowing Program is an opportunity for students to spend a day, or part of a day, on the job with a person or professional who works in an occupation in which s/he is interested. This experience is an important step toward career planning and graduation. The student will be responsible for all schoolwork missed during this experience. Thank you for your cooperation.

Student: _______________________________ Grade: _______

Job shadow experience

Date: ___________________________ Time: _______

Place: ___________________________________

Signatures of teachers from classes you will miss when job shadowing

Period/Block 1 _______________________________

Period/Block 2 _______________________________

Period/Block 3 _______________________________

Period/Block 4 _______________________________

Period/Block 5 _______________________________

Period/Block 6 _______________________________

Period/Block 7 _______________________________

Period/Block 8 _______________________________

_________________________________________  ________________________
Counselor/Coordinator Signature     Date

_________________________________________  ________________________
Parent/Guardian Signature      Date

Office given notice of absence? _____ YES _____ NO Date: ________________
Job Shadow Transportation Agreement

I give permission for my child, __________________________________________________, to drive a vehicle to ______________________________________________________ (Job Shadow Location) on _______________________________ (Job Shadow Date) for the purpose of job shadowing.

_____________________________________                   __________________________
Parent/Guardian Signature     Date

*     *     *     *     *     *     *      *     *      *     *     *     *     *     *     *     *     *     *     *     *

I give permission for my child, __________________________________________________, to ride in a vehicle driven by ______________________________________________________ (Person Driving) to __________________________________________________________________________ (Job Shadow Location) on _______________________________ (Job Shadow Date) for the purpose of job shadowing.

_____________________________________                   __________________________
Parent/Guardian Signature     Date

If you have any questions or concerns, please contact:

List names of guidance personnel involved in job shadowing, phone number, and each extension.
Workplace Tips

There are two general categories of factors that contribute to an employee’s success at the workplace. First, employees must master a set of specific technical skills and experiences. Second, all occupations require general skills, such as problem solving, communications, and interpersonal abilities. During your job shadowing-experience, you will be introduced to employees using both technical and general skills. When you are at the workplace, think about these tips and what it takes to be a top employee.

Be honest.

Have a positive attitude. Be friendly, courteous, polite, and cooperative with co-workers and clients.

Always be reliable and prompt. Customers and other workers are depending on you.

Notify the appropriate supervisor when you are going to be late or absent.

If you do not understand something, ask questions or ask for help. It is better to admit you are learning than to make a costly mistake.

Respond positively to constructive criticism.

Take responsibility for your actions.

Give your best effort at all times. If you have completed all your regular and assigned tasks, show initiative and seek additional work.

Challenge yourself to be a continuous, lifelong learner.

Always be open to change.
Prepared List of Questions for Job Shadowing Experience

- How long have you worked here?

- What are your responsibilities?

- What basic skills and knowledge does he or she use?
  - Reading
  - Listening
  - Applying mathematics
  - Listening
  - Speaking

- What technical skills are necessary to perform this job well, and how are they used?
  - Using computers
  - Operating office machines
  - Repairing equipment

- Which of the following problem-solving skills are needed, and how are they applied?
  - Organizing and planning
  - Interpreting and communicating information
  - Thinking creatively
  - Making decisions
  - Analyzing problems

- What interpersonal (or “people”) skills are needed, and how are they used?
  - Serving customers
  - Participating as a team member
  - Teaching
  - Leading
  - Resolving conflict
  - Working with cultural diversity

- What type of schooling is required for this job?

- What new skills have been learned since then?
- How might this job change in the next five years? The next 10?

- How many days a week do you work?

- How many hours a day do you work?

- What is the average income for this type of job?

- Does this job provide a steady income?

- What are some advantages of this job?

- What are some disadvantages of this job?

- Why did you choose this type of work?

- Do you enjoy your work?

- What was the hardest thing to learn about the job?

- What do you especially like about the job?
**Writing A Thank You Letter**

Thank you letters are an important business courtesy. When you tell people how much you appreciate good things they have done, you reward them for their efforts and make a good impression about yourself.

It is important to thank your workplace host for the time and effort that has been given to help you in career exploration. The following is a model for a thank you letter.

Date (Month, Day, Year)

Your Workplace Host’s Name  
Your Workplace Host’s Department  
Street Address  
City, State, Zip  

Dear (Mr., Ms. or Mrs. Workplace Host’s Last Name),

Paragraph 1: Thank your workplace host for his or her time and helpfulness.

Paragraph 2: Tell him or her why the experience was important to you. Share some of the things you learned through job shadowing.

Sincerely,

Sign Your Name

Print your name below your signature
Job Shadowing Reflection Form

Name _____________________________

Describe the department you visited.

What type of work activities did you observe during your job-shadowing experience?

What did you like best about your job-shadowing experience?

What did you like least about your job-shadowing experience?

What surprised you the most about what you observed, heard, did, and/or learned?

If you wanted to work in the department you visited, what might you do to prepare in the next five years, both in high school and afterward?

Would you consider a career in this field? Why or why not?
Job Shadow Supervisor Reflection

Name of career/occupation ________________________________________________

Company/business or industry you represent ____________________________________

Name of participating student _______________________________________________

Was the student properly prepared for the visit?       _____Yes        _____No

Was the student’s behavior appropriate?                  _____Yes        _____No

How did you feel about the experience? Did you see any benefit to yourself or the student?

Would you be willing to have another student job shadow your career?

_____Yes         ____No

Additional comments?

Signature of job shadow supervisor__________________________________________

Please return to:
Counselor and/or coordinator’s name
Name of high school
Address of high School
City, state and zip code