UNIVERSITY HIGH SCHOOL JOB SHADOWS EXPERIENCE REQUIREMENTS

Objective: The purpose of the job shadow experience is to better understand a career or occupation through observation and self-reflection. A job shadow experience will provide opportunities for students to be involved in an overview of the workplace.

Steps to Follow:

- (1) Meet with your advisor to go over form and fully understand what is expected.
- (2) With the help of your advisor and parents, select an appropriate occupation to job shadow.
- (3) Complete a proposal using the Job Shadow Experience and Verification Form. At the end of your job shadow experience have the person you job shadowed sign the form under verification signature.
- (4) Contact the person you plan to job shadow and complete arrangements for the job shadow.
- (5) Complete a **narrative reaction paper (1-2 pages) detailing the job shadow experience.** A typed copy of the narrative must be appended to the Job *Shadow Proposal and Verification sheet.*

The narrative reaction paper should address the following questions:

- a. Where did you complete the job shadow and whom did you shadow?
- b. What did you observe?
- c. What did you learn?
- d. What did you learn about yourself as a result of this experience?
- (6) Copies of completed Job Shadow Proposal and Verification Sheets and narrative reaction papers should be kept in your hard copy portfolio and uploaded to the Journal Section of your Naviance Family Connections (About Me Tab in the Interesting Things About Me Section)

Requirement:

Three job shadow experiences are required for graduation.

Each student must complete the equivalent of three (3) one half (1/2) days of job shadow in three (3) distinctly different settings or jobs. Each job shadow experience should be approximately three (3) to four (4) hours.

*At least one job shadow must be with someone unrelated to the student. Our intention is to help students explore career opportunities and expand their networks.

JOB SHADOW EXPERIENCE PROPOSAL AND VERIFICATION

STUDENT NAME:______ ADVISOR:

Verification Table (A separate form will be needed for each job shadow)

Occupation/Organization	Beginning Date	Ending Date	# of Hours	Verification Signature

My rationale for selecting this/these occupations:

Questions to ask as I do the job shadow experience:

What I hope to gain from the experience:

STUDENT SIGNATURE

ADVISOR SIGNATURE

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