



Individual Training Agreement (Form 3) COVID-19 Addendum

Program Name: _____

Employer Name: _____ Address: _____

Employer Supervisor: _____ Title: _____

Email: _____ Telephone Number: _____

Student: _____

Email: _____ Telephone Number: _____

Parent/Guardian: _____ Telephone Number: _____

Email: _____

School Supervisor: _____ Title: _____

Email: _____ Telephone Number: _____

Dates: Work will begin on _____ and end on _____

Hours: The hours of work will be from _____ to _____ on _____ (days of the week)

Wage Rate: Starting wages for the student will be \$ _____ per hour (must be at least minimum wage)

YST Program Participants agree to the following:

- The work of the student learner in an occupation declared hazardous under Minnesota Rules 5200.0910 to 5200.0920 will be incidental to the student learner's training, intermittent and only for short periods of time.
- The work of the student learner will occur with direct and close supervision of a qualified and experienced person.
- Safety instruction will be provided by the school and reinforced by the employer at the work site.
- A schedule of organized and progressive work processes to be performed on the job has been prepared.
- Both the school and the employer are required to maintain a copy of this agreement.
- **By signing this form, each individual attests to the above statements as true and correct.**

Copies of this agreement should be distributed to the student, parent/guardian, employer and Youth Skills Training Program. The original needs to be kept on file at the school and a copy kept on file at the employer.

Updated 8/18/20



Participants agree to outlined COVID-19 responsibilities in addition to original training agreement.

At any time, the school, employer, student or parent has the right to stop the paid work experience based on further guidance from the CDC, MDH or DLI. Employers and student workers are required to follow all current and future COVID-19 related executive orders from the Governor of Minnesota including wearing a face covering as described in [Executive Order 20-81](#) . Requirements outlined in this document may change at any time based on further guidance from the CDC, MDH and DLI.

Employer/Supervisor agrees to:

- Provide a copy of the employer COVID-19 preparedness plan to DLI for review
- Comply with all current and future COVID-19 executive orders set forth by the Governor of Minnesota
- Provide student COVID-19 training prior to students working in the facility
- Require students to follow the COVID-19 Preparedness Plan and procedures to prevent illness
- Encourage students to stay home if they are sick or have COVID-19 symptoms and have the student learner inform their supervisor if they have been in close contact with someone who has been diagnosed with or has symptoms of COVID-19
- Notify student, parent(s) and school supervisor of any positive cases of COVID-19

Worksite Supervisor Signature: _____ **Date:** _____

Student agrees to:

- Comply with guidelines established by employer and school including all COVID-19 policies and procedures.
- Commit to following safety instruction and use personal protective equipment (PPE) provided.
- Commit to the occupational and educational program.
- Assume the dual role of employee and student at the worksite.
- Maintain satisfactory performance in the work-based and school based environments.

Student Signature: _____ **Date:** _____

Parent/Guardian of Student agrees to:

- Provide consent for student to participate in the Youth Skills Training Program.
- Support the student in meeting the academic, training and attendance requirements of the program.
- Meet with employer, school and other partners during the establishment of the program.

Parent/Guardian Signature: _____ **Date:** _____

School agrees to:

- Coordinate school and work based learning activities.
- Assist with the selection of students for the program.
- Maintain contact with parents.
- Coordinate with the Department of Labor and Industry, employers and appropriate agencies.
- Provide related technical and employment training to the student.
- Provide student with orientation and safety instruction prior to employment.
- Promote YST Programs to local business and industry.

School Coordinator Signature: _____ **Date:** _____

Updated 9/30/20

