

KSS Career Programs

Job Shadow Request Form

Student Name:	Grade:	Today's Date:
Student or Parent Email:		
CAREER PLANS		
My present Career Interests include the following:	:	
Α		
B		
What are your Job Shadow choices? Do you know someone in this career?		
1 st Choice:		
Activity Name	Office Notes:	
Business Name		
2 nd Choice:		
Activity Name	Office Notes:	
Business Name		
Schedule - Subject Which classes	Which classes can you to miss?	
2 Which day of the	Which day of the week would you prefer to job shadow?	
3		
Can you go on	Can you go on the weekend? If so which day?	
	What days cannot you not go on a job shadow?	
Timetable		