

Waiakea High School



Public Services Academy

STUDENT Forms

Senior Project / Capstone

For Student Internships

Class of 2017

Contents:

Legal Forms – These two forms must be returned to your Capstone teacher **BEFORE** you begin your internship or project:

1. Work-Site Placement & Consent for Participation
2. Parent Authorization for Student Travel

During your internship, on the **first class day of each week**, you will need to submit a:

- Weekly Reflection (for the prior week)
- Weekly Timesheet (for the prior week)
- ***Final Reflection (AFTER the completion of the internship/project)

Mentor Form – Give this to your employer/mentor:

- Workplace Skills Evaluation



Waiākea High School
PERSONAL TRANSITION PLAN (PTP) &
SENIOR PROJECT PARENT CONSENT FORM

Parents of Seniors in ALL Waiakea High School Academies,

This letter is regarding the completion of the Personal Transition Plan (PTP) credit for graduation and Senior Project. All seniors, regardless of Academy, must earn the PTP (0.5 credit) in order to graduate. For the Public Services Academy, seniors have been working on completing these requirements in Advisory. Items such as: Personal Data Sheet and Personal Statement are just some of the required assignments that need to be completed prior to September 28th 2016.

The majority of seniors at Waiākea High School also choose to complete a Senior Project, regardless of earning a special recognition diploma. The Senior Project is a yearlong independent project that provides a learning stretch for the student.

Completion of Senior Project is required for those students wanting to earn STEM Honors recognition with their high school diploma. In addition to the Hawaii High School Diploma, students may also receive other special recognition. The following School College and Career Recognition is awarded to students with cumulative mark point averages (GPA) of 3.0 and above by the end of the 3rd quarter of their senior year.

Academic Honors

- 4 credits of Math (4th credit beyond Algebra II)
- 4 credits of Science
- 6 credits minimum in AP/IB/College Credit (e.g. Running Start)

STEM Honors

- 4 credits in Math (Including Pre-Calculus)
- 4 credits of Science
- STEM capstone/STEM Senior Project

CTE Honors

- Completes program of study (2-3 courses in sequence)
- Earn a B or better in each required program of student courses
- Complete one of the following:

higher

- Meet or exceed proficiency on performance-based assessment
- Earn at least 70% of end-of-course assessment
- Earn a nationally recognized certificate
- Earn a passing score on a Dual Credit Articulated program of study assessment

Grade Point Average Honors

- Cum Laude – GPA of 3.0 to 3.5
- Magna Cum Laude – GPA of 3.5+ to 3.8
- Summa Cum Laude – GPA of 3.8+ or

I understand that my child must complete his/her PTP requirement in order to graduate. I also understand that my child:

_____ is opting **TO** complete a Senior Project. I am aware of my child's topic and also understand that my child must successfully complete all four required components (Research Paper, Portfolio, Presentation Board and Presentation at Senior Showcase April 18th 4:45pm) and meet **ALL** deadlines in order to earn the Senior Project (1.0) credit.

Senior Project Topic Area: _____

_____ Is opting **NOT** to complete a Senior Project.

Student Name

Mr. Joel M. Wagner-Wright, M.Ed.

Capstone Teacher Name

Parent Name

Parent Signature

Date

STATE OF HAWAII - DEPARTMENT OF EDUCATION

Waiākea High School Senior Project

PARENT AUTHORIZATION FOR STUDENT TRAVEL

Dear Parents:

Permission is requested for your child to participate in the following school-sponsored activity:

School: Waiākea High School Activity: Senior Project / Capstone Internship

Teacher/Advisor: Mr. Joel M. Wagner-Wright, M.Ed.: WHS PSA Capstone Teacher

Place: _____ Dates: October 26th 2016 – March 1st, 2017

Time: Off-Campus &/or After school Organization: Waiākea High School Senior Project (DOE)

PARENTAL PERMISSION

(To be completed by Parent or Guardian)

Name of Student: _____ Home phone#: _____

Check as appropriate:

____ My son/daughter **HAS** permission to participate in the above *Senior Project Internship*

____ My son/daughter **DOES NOT** have permission to participate in the above *Senior Project Internship*
(NOTE: If permission is not granted, student will not be allowed to be enrolled in the Internship program)

Emergency phone #: _____ , _____
Relationship to student

Emergency phone #: _____ , _____
Relationship to student

MEDICAL INSURANCE COVERAGE:

____ My child has medical coverage with _____
(Name of plan, i.e., HMSA, Kaiser, Military, Quest, etc.)

____ My child is NOT covered by any medical insurance plan.
(NOTE: If a child is not covered by medical insurance, contact the School Site Coordinator, Nanette Bishop, 974-4888)

PRIVATE VEHICLE USAGE: (Initial ALL appropriate statements)

If private vehicles are used, permission is granted as follows:

- ____ My son/daughter may drive to the *Senior Project internship/* worksite alone
- ____ My son/daughter may transport other students to the *Senior Project internship/* worksite
- ____ My son/daughter may ride in a vehicle driven by another student to the *Senior Project internship/* worksite
- ____ My son/daughter may ride in a vehicle driven by an adult to the *Senior Project internship/* worksite

We (I) grant permission for said student to participate in the planned activities of the travel, and to travel by private or commercial car, bus, train, airplane and other means of transportation as required. I release the STATE from liability resulting from the use of other than school vehicles pursuant to HRS 286-181.

In the case of illness or injury to said student, we (I) hereby consent to and authorize such medical or dental treatment as deemed necessary, and agree to pay for such medical and dental costs if incurred.

Print or type Parent's/Guardian's Name

Parent's/Guardian's Signature

Date

Please specify any special medical or other such instructions you would want considered. _____



Waiākea High School Senior Project

155 W. Kawili Street, Hilo, HI 96720
Phone (808)974-4888 Fax (808)974-4880

Work Site / Project Weekly Reflection

Minimum Word Count for Reflection: 100 words (Typed with word count in parentheses at the end of the entry)
Staple typed reflection to the back of this page.

Name: _____

Date: _____

Period: _____

Name of work site / project name: _____

Week # _____ Week of: _____

*****Attention Students! You will need a NEW ONE of these EVERY WEEK... that means approximately 20*****

Instructions:

1. Use the following format:
 - a. Typed in Times New Roman 12 font
 - b. Title: Work Site / Project Weekly Reflection
 - c. Name
 - d. Date
 - e. Period
 - f. Name of work site or project
 - g. Week #
 - h. Week of:
2. Reflection (Minimum 100 words per reflection.)
 - a. Typed with word count in parentheses at the end of the entry
 - b. Times New Roman 12 pt. font
 - c. Entry will be approximately ½ page
 - d. SINGLE SPACED: Do not skip lines
 - e. Use the following questions as guidelines to write your reflection:
Describe the activities of the week.
 - 1) What were your responsibilities or what kind of work did you do on your project?
 - 2) How were you able to follow through on these responsibilities/procedures?
 - 3) How much of a challenge was this for you?
 - 4) How were the days the same?
 - 5) How were the days different?
 - 6) Did you discover any of your strengths or weaknesses? Explain.
 - 7) Describe situations you experienced that were valuable for you.

SCORE	4	3	2	1
TRAITS	All of the above reflections are done neatly, accurately, and in great detail.	All except one of the instructions are completed neatly and in detail.	Half of the instructions are completed in some detail.	Less than half of the instructions are completed in minimal detail.



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Date: _____

Period: _____

Name of work site / project name: _____

Week # _____ Week of: _____

Instructions:

3. Use the following format:
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 - b. Title: Work Site / Project Weekly Reflection
 - c. Name
 - d. Date
 - e. Period
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 - g. Week #
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 - a. Typed with word count in parentheses at the end of the entry
 - b. Times New Roman 12 pt. font
 - c. Entry will be approximately ½ page
 - d. SINGLE SPACED: Do not skip lines
 - e. Use the following questions as guidelines to write your reflection:
Describe the activities of the week.
 - 8) What were your responsibilities or what kind of work did you do on your project?
 - 9) How were you able to follow through on these responsibilities/procedures?
 - 10) How much of a challenge was this for you?
 - 11) How were the days the same?
 - 12) How were the days different?
 - 13) Did you discover any of your strengths or weaknesses? Explain.
 - 14) Describe situations you experienced that were valuable for you.

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Weekly Timesheet

Please print in ink.

Student Name: _____ Pd. _____ Teacher: _____

Week # _____ Week of: _____

Date	Time In	Time Out	Total Hours	Supervisor's Signature
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday				
Total Hours for the Week:				

- Rubric:
- 4 All required areas are completed in great detail.
 - 3 All except one of the required areas are completed in detail.
 - 2 Half of the required areas are completed in some detail.
 - 1 Few of the required areas are completed in minimal detail.

Comments by Supervisor or Teacher:

*****Attention Students! You will need a NEW ONE of these EVERY WEEK... that means approximately 20*****



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Comments by Supervisor or Teacher:



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 Phone 808.974.4888 Fax 808.974.4880

Workplace Skills Evaluation

Student: _____ Student Phone #: _____

Workplace: _____ Employer/Mentor Name: _____

Employer/Mentor Signature _____ Evaluation Period: _____ to _____

Evaluation Scale – Please use the following scale when evaluating each workplace skill.

- Excellent – Demonstrated competency in this area 90-100% of the time.
- Average - Demonstrated competency in this area 80-89% of the time
- Below - Demonstrated competency in this area below 70% of the time

Student:	Excellent	Average	Below	Comments
Practices polite, courteous behavior				
Accepts direction and correction with a sense of humor				
Shows willingness to learn				
Shows true interest in the internship/work				
Demonstrates active engaged listening				
Practices responsibility and reliability				
Demonstrates ethical decision making and behavior				
Demonstrates independent and team problem solving skills				
Asks for advice and questions when necessary				
Demonstrates good time management				
Practices self reliance and does not expect the mentor to provide all direction				
Pays attention to detail				
Corrects obvious 'mistakes' without being told				
Respects mentor's expertise and leadership				

ATTENTION STUDENTS: This form is to be completed by **YOUR MENTOR** at the **END** of your internship



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FINAL REFLECTION

Format: Single spaced; Times New Roman 12 point font; minimum 1 full page

Retrospective:

Your FINAL REFLECTION should provide a retrospective (review) of your experience. Discuss your internship in detail, particularly: the site or location of your internship/project; the general surroundings; your duties and responsibilities; and the company for whom you worked. Discuss any challenges that you encountered.

If you created a project, describe: your project; the locations where you created the project; materials used; conditions; budget or expenses; or anything else that is of importance to your project. Discuss any challenges that you encountered.

Expectations:

Discuss the expectations that you had when you began this project. How have those expectations been met, or how have they changed as a result of the actual experience.

What I Learned:

One requirement of your Senior Project was that it would represent a "learning stretch," something about which you did not have a complete understanding and which you would learn as a result of the completing the project or internship. Having completed the project, what have you learned? Be specific and describe this in detail.

*** STUDENTS: This ONE PAGE summary reflection is to be done at the **END** of your internship***