

# Job Shadow Guide

Invest 127 S. Peyton Street Alexandria, VA 22314 800.221.7917 | <u>www.investprogram.org</u>



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## Sample Ground Hog Planning

When <u>What</u>			<u>Who</u>	<u>Status</u>
October		Identify date of event Communicate with Teachers for pl	lanning	
November	r	Reserve Room(s) for group meetin Reserve bus Identify ( <i>confirm</i> ) Hosts Hosts update ( <i>complete</i> ) Job Descr	-	
December		Packages Mailed to Teacher • Host Job Descriptio • Student Roster / Sh • Consent forms • Med Authorization • Photo release	adow Choices	
		ID Welcome / Departing Sp Invite Guests • Invest ( <i>name</i> , chair) • Insurance Dept. Cat Vans Photography		
January	5	Arrange Food Continental Breakfast • Boxed Lunches		
	5	Coordinate Security –guard at the do	or	
	10	Rosters returned from school	01	
		• Match student with	hosts	
		• ID additional hosts a	as needed	
	10	"Tchotchkies" for students		
	15	Confirm busses, food, room set-up, he	osts, and speake	ers
	15	Conference Call with Hosts		
	15	Conference Call with Teachers Schools retain consent, med	l & nhoto forma	<b>,</b>
	25	Roster & Guest list to security to prep	-	
	10	Gifts for Teachers, Hosts		
	10	Recruiting Posters / Material		
Feb	5	Thank You Notes		



## Sample Job Shadow Agenda <u>Friday, February X, 20XX</u> <u>Time: 8:00-12:00</u> <u>Location: Xxxxx Street</u>

7:30 a.m.	Bus departs schools
8:15 a.m.	Bus arrives at Xxxxxx Street (Map & Directions attached)
	Security will greet in Plaza Building entry area
8:15 a.m 8:30 a.m.	Continental Breakfast
8:30 a.m 8:45 a.m.	Welcome
8:45 a.m 11:45 a.m.	Group Break Out – Department coordinators take students
11:45 a.m. – 12 Noon	Pick up Box lunches in Meeting Room I
12 Noon	Departure from Xxxxxx Street

### **Guests**

Gary - Invest Teacher, Xxxxx High School Ralph - Invest Teacher, Xxxxxx High School Anna - Consultant, Xxxxxx High School Peter – President, XYZ Agency

## **Primary Contacts**

Name	Office Phone	Cell Phone
Avery	860.xxx.xxxx	860.xxx.xxxx
Neal	860.xxx.xxxx	860.xxx.xxxx





Avery Travelers One Tower Square Hartford, CT 06183

(860) 277-XXXX Avery@Travelers.com

December 1, 2018

Teacher Name Xxxxxx High School Xxx Forbes St Xxxxxxx, CT, 06XXX

Re: Job Shadow/Ground Hog Day - February 2, 2019

#### Dear Mr./Mrs.Teacher's Name:

To maximize the experience for the Invest insurance students who will participate in this year's job shadowing experience, there is a six-step process we will follow:

#### Step I.

The top half of attached "host sheets" have been filled out with information from the respective business units/disciplines to help students make an informed choice.

Step II.

After reviewing "host information" students should indicate their 1<sup>st</sup> and 2<sup>nd</sup> choices on the enclosed attendees roster. This should be returned to me by <u>Friday</u>, January 18, 2019. It will serve two purposes:

(a.) It allows us to give prior notification to corporate security for visitor clearance.

(b.) It gives us an opportunity to see the distribution of student interest and finalize transportation arrangements.

#### Step III.

Signed "Parent /Guardian Consent (students under 18) with media release (all) and Medical Authorization forms (all) should be secured and copies provided to us.

#### Step IV

The actual observance and interaction with the hosts. This will be the student's opportunity to ask questions, hands on involvement, etc.

#### StepV

We will hold a conference call on Monday, January 14, 2018 at 2:30PM with teachers and Travelers staff to make sure that everyone is connected on meeting events, responsibilities and expectations.

#### Step VI

Process is completed when students evaluate and share benefits derived by completing the bottom half of "host form" in a subsequent classroom exercise.

One final note, as the Invest instructor, you and anyone else connected to this program are more than welcome to attend. *Please do not hesitate to call should you have any questions.* 

Sincerely, Xxxxxxx



## (Step II)

## Ground Hog Job Shadow Attendees Roster

Student Name	School	Business Unit- 1 <sup>st</sup> Choice	Business Unit- 2 <sup>nd</sup> Choice



## Ground Hog Job Shadow Attendees Roster

Business Unit	# Students Attending	Host	Phone
Actuarial	1	Avery	XXXXX
Affinity	2	Mark	XXXXX
Agencies	4	Sue - RC Knox	XXXXX
		Robin - HRH	XXXXX
Agency Compensation	8	Chris	XXXXX
		Linda	XXXXX
		Lucy	XXXXX XXXXX
		Avery	
Boat & Yacht	4	Debbie	XXXXX
Bond / FP&II	6	Paul Jennifer	XXXXX
			XXXXX
Claims	7	Sarah Jon	XXXXX
Communications	4	Monique	XXXXX
Construction	4	Mary	XXXXX
Event Management	4	Jessica Carey	XXXXX
Flood	4	Beth	XXXXX
Global Underwriting	3	Karen	XXXXX
Information Technology	7	Howie, Greg, Nick, Jon	XXXXX
Loss Control	5	Art	XXXXX
		Tony	
Middle Market	2	Jim	XXXXX
National Programs	2	Bruce	XXXXX
		Scott	XXXXX
Personal Insurance	6	Krista	XXXXX
		Jillian	XXXXX
Select Accounts	2	Charlie	XXXXX



(Step I)

Invest Job Shadow Data Sheet

## Host Information Sample

### Name of Business Unit: Marketing Services (Communications)

Host Name: John

**Host Job Functions:** We will visit with Marketing Communications staff including graphic designers, web designers and account managers, and also visit with public relations and internal communications.

**Examples of Host Responsibilities:** Marketing: Communications manages the process for the development of print and Internet materials about the company and its products; how such materials are designed and monitored during production. Also see how press releases are written and how Travelers interacts with the media to publicize the company, respond to inquiries and develop communications plans, including crisis communications.

How do these responsibilities help organization meet its goal: Communications is the "glue" that holds together the company's public image through brand management, advertising and public relations.

**Explain a typical day:** Review typical communications request from the business. Follow a typical web design, web content brochure, media requests through the development cycle.

### (Step VI)

#### **Student Observations**

What did I learn?

Functions observed

Would like to know more about

Secure business card (Y/N)



Your son/daughter has been invited to attend a Job Shadow event at a place of work. He/she will be assigned to an employee, a Host of the worksite, who will lead him/her through a department in the place of work. They will discuss a typical workday and discover the various aspects of working in that particular industry. The student's school will provide the transportation for this event. In order for your child to participate, this form must be filled out and returned to his/her teacher before the day of the event.

# **CONSENT FORM**

## PARENT/GUARDIAN CONSENT FORM

I give permission for my son / daughter

to attend the Job Shadow event to take place at

Date	Time	2	
Transportation Transportation will b		rovided by the school	
I understand that my son/daughter will travel to the workplace under the supervision of school staff			
Parent/Guardian Signature		Date	



# Medical Authorization

In order for your son/daughter to participate, this form must be filled out and returned to his / her teacher before the day of the event.

Should it be necessary for my son/daughter to have medical treatment while participating in the Job Shadow event, I hereby give the school district and worksite personnel permission to use their best judgment in obtaining medical service for my son/daughter, and I give permission to the physician selected by the school district personnel to render whatever medical treatment he/she deems necessary. Permission is also granted to release necessary emergency contact/medical history to the attending physician, or to the worksite as needed.

Student's Name	Date of Birth
Address	
City, ST ZIP Code	
Home Phone	
Parent's/Guardian's Name	
Home Phone ( )	Work Phone ( )
Alternative Emergency Contact	
Emergency Contact	
Home Phone ( )	Work Phone ( )
Address	
City, ST ZIP Code	
Medical Information	
Hereitel/Clinic Derfrager	
Hospital/Clinic Preference Physician's Name	Phone Number
Allergies/Special Health Considerations or Restrictions	
Antiges/special freature considerations of Restriction	5
I hereby agree to all of the above authorizations and pe	ermission.
Parent's/Guardian's Signature	Date



## Parent Release Form for Media Recording

I, the undersigned, do hereby grant or deny permission to [**Organization**] use the image of my child, , as marked by my selection(s) below. Such use includes the display, distribution, publication, transmission, or otherwise use of photographs, images, and/or video taken of my child for use in materials that include, but may not be limited to, printed materials such as brochures and newsletters, videos, and digital images such as those on the [**Organization**] Web site.

Deny permission to use my child's image at all.

- Grant permission to use my child's image in the following ways (mark all that apply):
  - Limited usage: I want my child's image used <u>within</u> the [Organization] setting only (not in the larger community).
  - □ Limited usage: I want my child's image used for <u>educational</u> materials only (not marketing). This could be either within [Organization] or in the larger community. One example of this could be videos in parent education classes.
  - Limited usage: I want my child's image used on printed materials only (no digital or video use).
  - □ Unrestricted usage: I give unrestricted permission for my child's image to be used in print, video, and digital media. I agree that these images may be used by [Organization] for a variety of purposes and that these images may be used without further notifying me. I do understand that the child's last name will not be used in conjunction with any video or digital images.

Parent/guardian signature \_\_\_\_\_ Date \_\_\_\_\_

Please make a copy of this form for your own records and mail or fax the original to:

[Recipient Name] [Title] [Organization] [Street Address] [City, ST ZIP Code] [Fax number]

If you have questions, contact [Name] at [Phone number]





## Sample

February X, 2019

Name Business Unit

Dear:

Thank you so much for your participation in the 2008 Annual Job Shadow Event. The feedback from teachers and returning students stated that this was the best Job Shadow event so far. Neal and I thank you for all of your efforts and commitment to the program's success. We hope you have enjoyed your time with the students just as much as they enjoyed their time with you.

Avery Neal Director, Field Management

Invest Intern