



Texas Workforce Commission  
Vocational Rehabilitation Services  
**Paid Work Experience  
Worksite Agreement**

Paid Work Experience Services must be provided in accordance with the [Board VR Requirements Manual](#). This Agreement may be modified or replaced if conditions change. Failure to fulfill the responsibilities set out in this document may result in: disallowed costs and/or barring future participation in this program.

**Participant Information**

Participant name:

VR Case ID:

Date of birth:

Contact number: (    )

Email address:

**Local Workforce Development Board and Board Contractor**

Board name:

Board contractor name (when applicable):

Point of contact name:

Point of contact email address:

Point of contact phone number: (    )

Fax number: (    )

**Worksite Placement**

Worksite:

Street address (include suite number, if any):

City:

State:

ZIP code:

Designated Worksite Supervisor or Contact Person Name:

Phone number: (    )

Email address:

Describe the skills, duties and responsibilities the VR participant will be performing at the work experience site.

Length of the worksite experience:      Week(s)

Hours to be worked per week:

**Worksite Agreement**

As a worksite, we agree to:

1. Provide meaningful, well supervised, safe employment for VR participants;
2. Assure sufficient work to occupy the VR participant;

3. Provide appropriate and sufficient instruction and equipment/materials/tools, as appropriate, for VR participants to conduct their job duties;
4. Assure that any VR participant receives safety training provided to employees performing same job duties;
5. Assure that all VR participants are supervised at all times by a qualified supervisor. No VR participant may be placed in an employment activity where a member of that person's immediate family is directly supervised by or directly supervises that individual;
6. Assure compliance with state and federal Employee Right-To-Know and Child Labor laws; Americans with Disabilities Act; Fair Labor Standards Act and Equal Employment Opportunity laws and regulations;
7. Assure employment of the VR participant will be supplemental and will in no way affect status of regular employees or seasonal employees normally hired;
8. Cooperate with TWC-VR staff in monitoring progress of VR participants;
9. Adhere to the regulations and conditions as outlined on this Agreement and in the Board VR Requirements Manual;
10. Assure that all work is conducted in a sanitary and drug-free environment, under safe working conditions in compliance with OSHA standards;
11. Maintain an accurate record of time and attendance for each VR participant, which record shall be signed and submitted according to the:
  - Worksite payroll process and schedule
  - Board payroll process and schedule

For the avoidance of doubt, VR participants are not employees of the worksite, and the worksite shall not be liable for any amounts owed to any VR participant.
12. Inform VR participants of employment rules including grievance procedures and non-discrimination policy;
13. Notify Service Provider (Board) of any VR participant terminations; and
14. Notify Service Provider (Board) within one business day of any workplace injury of a VR Participant and submit appropriate forms.

Designated Worksite Supervisor Name:

Designated Worksite Supervisor Signature:

**X**

Date:

### Participant Agreement

Note: A parent or representative must sign if the student is a minor (under 18 years of age).

As a participant, I agree that:

1. Paid work experience assignments will not exceed twenty (20) hours per week and twelve (12) weeks per worksite assignment;
2. I am responsible for reporting my earnings to any agency from which I receive economic assistance; and
3. This is not a permanent position and can be terminated by any party at any time.

VR Participant Signature:

**X**

Date:

Parent/Guardian/Representative Signature:

**X**

Date: