

**NORTHWEST REGIONAL WORKFORCE  
INVESTMENT BOARD**

**Summer Youth Employment Worksite Agreement 16-17**

This agreement is made between the \_\_\_\_\_, (The contractor:  
and (the worksite agency) \_\_\_\_\_  
to provide employment, training and educational services to eligible youth participants in the Summer Youth  
Employment Program funded under the State of Connecticut, Dept. of Labor.

**SECTION I – CONDITIONS**

1. The worksite agency/contractor agrees to comply with all Northwest Regional Workforce Investment Board (NRWIB) regulations, policies and directives.
2. Participants may not be used to free regular employees to perform other tasks and duties.
3. WorkForce Connection staff (the One Stop operator for NRWIB) will have access to worksite records pertaining to this agreement. This will include personnel, payroll records and other related documents. The worksites will be open to NRWIB/WorkForce Connection staff for program monitoring.
4. Where a collective bargaining agreement is in existence, the union or bargaining agency must concur with the content of this agreement.
5. All worksites must abide by any applicable State or Federal Occupational Safety and Health Act (OSHA) standards.
6. Participants shall be paid the minimum wage of \$9.60 per hour. **Increased to \$10.10 effective 1/1/17**

**SECTION II - RESPONSIBILITIES**

A. The worksite agency will:

1. Maintain time and attendance records for each participant. Participants shall sign in when reporting to work and sign out at the completion of their scheduled hours. The participant and the supervisor will sign time and attendance records at the end of the week.
2. Comply with established payroll procedures and ensure that the participant(s) is paid only for actual time worked.
3. Provide adequate supervision, direction, and assist in participant reviews and evaluations.
4. Adhere to the training outlines in section III as submitted.
5. Report accidents to the Office within 24 hours of occurrence.
6. Notify the Office regarding any problem or concern within 24 hours after being identified.
7. Comply with any and all provisions of the Civil Rights Act of 1964 and the Unfair Employment Practice Act, Public law 31-126.
8. Comply with any and all provisions of the Immigration Reform and Control Act of 1986 to include the completion of the INS form, I-9 upon program enrollment. **\* To be completed by contracted program provider- not host worksite**
9. Maintain evaluations on work performance and educational classes. Other program reports will be completed as requested. **\* To be completed by contracted program provider- not host worksite**
10. Refer participants to the NRWIB/ Workforce Connection Office as appropriate for counseling.
11. Immediately notify the Office if the number of participants or activities included in this worksite agreement change at any time during the program.

12. Maintain a current and accurate list of worksites and activities. \* To be completed by contracted program provider- not host worksite

B. The contractor will: (THIS DOES NOT PERTAIN TO THE HOST SITE)

1. Provide payment to all participants.
2. Maintain participant earnings, social security and tax records.
3. Maintain workman's compensation coverage on all participants. This shall include general, bodily and property coverage insurance.
4. Provide counseling services, educational classes and labor market orientation
5. Train the worksite supervisors, assure his/her attendance at the supervisor's orientation classes to be conducted by the Office prior to the start of the program, provide the supervisor with appropriate written materials to include a copy of this agreement, the orientation handbook and other pertinent documents.

### **SECTION III - TRAINING OUTLINE**

**Name of the worksite:** \_\_\_\_\_

Title of Work Based Project/ Worksite \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Name and Title of On-Site Supervisor: \_\_\_\_\_

\_\_\_\_\_ Phone: \_\_\_\_\_

Name and Title of Alternate Supervisor: \_\_\_\_\_

\_\_\_\_\_ Phone: \_\_\_\_\_

Ratio of Participants to Supervisor: \_\_\_\_\_ to \_\_\_\_\_

**Participant Job Title**

**Number of Slots**

_____	_____
_____	_____
_____	_____

Slot(s) shall commence on \_\_\_\_\_ and continue until  
\_\_\_\_\_ for a period of \_\_\_\_\_ weeks.

Number of days per week \_\_\_\_\_

<b><u>Day</u></b>	<b><u>Time</u></b>	<b><u>Hours of Work</u></b>
Monday	_____	_____
Tuesday	_____	_____
Wednesday	_____	_____
Thursday	_____	_____
Friday	_____	_____

Consistent with the job identified above, provide the following information:

Identify the participant(s) principal activities and responsibilities, identify the tools and equipment to be used and identify the skills that will be learned.

---

---

---

---

If the participants will be working outdoors, identify the activities that will be scheduled for inclement weather.

---

---

---

Failure of the worksite to adhere to this agreement shall be cause for termination and said slot(s) at the discretion of the Office. This agreement is subject to federal funding availability.

---

As approved by the Northwest Regional Workforce Investment Board:

---

Signature	Title	Date
Catherine N. Awwad	Executive Director	

---

Signature	Title	Date
Agreed to by the Contract Provider:		

---

Signature	Title	Date
Agreed to by the Host Worksite		

***UNION CONCURRENCE***

I, \_\_\_\_\_, as chief representative for the named bargaining unit, being \_\_\_\_\_, do hereby attest that this worksite does not infringe upon or hinder the current collective bargaining agreement, or negotiations thereof, which exist between this bargaining unit and the worksite.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

Please sign if not applicable:

DOES NOT APPLY:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

