



Marketing Work Program Coordination Call Card

Students Name _____ Year: _____

Students Phone Numbers: Home _____ Cell _____

Name of Job Site: _____

Address: _____

Evaluators Name/Title: 1. _____

2. _____

Job Site Phone Number: (____) _____

Students First Day of Employment: _____

Students Job Site Duties: _____

Students Wage: _____ E-Mail Address: _____

1st Semester Schedule

2nd Semester Schedule

Hr	Class	Teacher	Room	Hr	Class	Teacher	Room
1				1			
2				2			
3				3			
4				4			
5				5			
6				6			
7				7			

Students Name: _____

Comments: _____

DATE	Items Discussed	Contact Person	Grade
