

Governor's Work Ethic Certificate Program Implementation Application

School Corporation Name:		
List ALL Schools for Implementation (include Elementary and Secondary, if applicable):		
Contact Name:	Contact Title:	
Contact Phone:	Contact Email:	
Recent School Year Graduation Cohort (# of potential graduates):	Recent School Year Graduation Rate (actual graduation percent):	
Planned School Year Implementation:	Potential Student Graduates (number in cohort):	
Targeted Students: ☐ Post-secondary Education-bound students ☐ Workforce, Industry-Certification or Apprenticeship-bound students ☐ Students with disabilities (including those with an IEP or 504 Plan) ☐ Career and Technical Education students ☐ Jobs for America's Graduates students		
List all Teachers/School Personnel Names and Titles Responsible for Implementation:		
List at least five (5) Partnering Employers, including organization, contact name and contact title involved in Advisory Council:		
List at least three (3) non-employer Advisory Council members, including organization, contact name, and contact title:		



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Please check all Standard Governor's Work Ethic Certificate Competencies in specific requirements:	ncluded in corporation-	
Students will demonstrate ability to persevere through challenges and problem-solve		
 Students are accepting and will demonstrate service to others, possess communicate clearly 		
Students will demonstrate ability to be a self-starter and critical thinker		
Students will demonstrate ability to be a sen-starter and critical timiker Students will demonstrate reliability, responsibility and teamwork		
☐ Students will demonstrate organization skills, importance of punctuality and self-management		
☐ Students will demonstrate academic readiness: possessing a cumulative GPA of 2.0 or higher		
and has met or is on track to meet all graduation requirements		
Student's attendance rate is 98% or higher AND has four or fewer sign-ins, sign-outs or times		
tardy to school during the eligible school year		
☐ Student has 1 or fewer discipline referrals during the eligible school year		
Student completes a minimum of 6 hours of school or community service during the eligible		
school year, for which s/he has not received academic credit or compensation		
Please provide a narrative justification for deviation of any of the above standard competencies		
(list standard competency and alternate competency):		
Please provide a brief narrative regarding timeline for implementation:		
Please provide a brief harrative regarding timeline for implementation.		
Please provide details on prior Technical Assistance and/or requested Technical Assistance for		
implementation:		
Floature is Circumstance (puint name)	Deter	
Electronic Signature (print name):	Date:	
DWD USE ONLY		
Received by:	Date:	
Approved by:	Date:	