



Please submit registration to:  
 Email: [colleen.devoe@ja.org](mailto:colleen.devoe@ja.org) or  
 Fax: 251-340-8405

Work Readiness | Entrepreneurship | Financial Literacy

### AT&T JOB SHADOW REGISTRATION

*All information will be kept confidential and is for Junior Achievement purposes only.*

**School:** \_\_\_\_\_

**School Address:** \_\_\_\_\_

**School District:** \_\_\_\_\_

**Phone :** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**School Coordinator:** \_\_\_\_\_

**Office Phone:** \_\_\_\_\_ **Cell:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**PREFERRED METHOD OF CONTACT:** \_\_\_\_\_

**WHAT IS THE BEST TIME TO REACH YOU?** \_\_\_\_\_

#### **PARTICIPATION REQUIREMENTS:**

The AT&T Job Shadow is offered at no cost to the school or the students. However, in order to ensure that we meet the requirements of the program for funding purposes, the program requires that 80% of the participating students meet two of the following criteria:

1. Economically disadvantaged (measured by student's free or reduced lunch status)
2. High Absenteeism/Tardy rates
3. Off-track for on-time graduation

If you plan to participate, please estimate the total number of students you anticipate participating. Also, provide possible dates you would like to participate. Upon receipt of this registration, Junior Achievement will confirm dates with AT&T and provide program materials to the school.

**Total Number of Students:** \_\_\_\_\_ **Grade Level(s):** \_\_\_\_\_

**Preferred Semester:** \_\_\_\_\_

**Potential Dates:** \_\_\_\_\_

#### **Questions/Comments:**

**FOR JA OFFICE USE ONLY:**

County: \_\_\_\_\_ MS \_\_\_\_ TO \_\_\_\_ RE\_\_\_\_