

Welcome to

HOT & NOW
How MCPA can help you
save your full FTE?

Presented by

***Michigan Career Placement
Association***



Introductions

- **Sasamon Parker, MCPA, President**
 - Placement Specialist, Muskegon Area Career Tech Center
- **Wayne Borr, MCPA, President-Elect**
 - Director of Career and Technical Education, Niles High School
- **Spike Fueher, MCPA, Past-President**
 - Placement Coordinator, Fowlerville High School
- **Kyle Morrison, MCPA Regional Rep.**
 - Coordinator, Newaygo County Regional Educational Service Center
- **Diana Bailey, Placement Specialist**
 - Office of Career & Technical Education, Michigan Department of Education



Sasamon Parker

Placement Specialist
Muskegon Area Career Tech Center
231.767.3607
sparker@muskegonisd.org
MCPA, President



Presentation Goals



- Explain what the MCPA is
- Explain what our organization goals are
- Share the resources we can provide placement coordinators
- Explain how we can provide professional development to school personnel involved with student work placements
- Explain how we can assist school districts with student work placements
- Provide some State of Michigan updates on placement regulations
- Provide adequate question & answer time

What is the MCPA

- **MCPA = Michigan Career Placement Association**
- The MCPA is an organization comprised of placement coordinators from across the state who's purpose is to promote student education through workplace placements and to accurately disseminate information to help maintain the required data that substantiates learning.



MCPA Goals

- To promote career preparation as an essential component in the continuum of programs and services to students and individuals
- To organize and disseminate information regarding:
 - Career preparation activities
 - Placement options for individuals
 - Information regarding existing LEA/ISD programs and services
 - Michigan Department of Career Development programs and services

Member Benefits

- **Professional Development**
 - *State-wide conferences & workshops*
- **Communication**
 - *Newsletters*
 - *Regional meetings*
 - *Coordinators Handbook*
 - *State-wide membership directory*
- **Updates**
 - *Labor law information*
 - *Liability awareness*
 - *Legislative information*
- **Monitoring Issues**
 - *State approved forms & procedures*
- **Networking**



MCPA Resources

- The MCPA holds two conferences per year to assist coordinators stay up-to-date with the changes in labor laws, pupil accounting regulations & required data recording, and provide professional development.
- **Annual MCPA Summer Conference**



Annual MCPA Summer Conference

June 20 – 21, 2011

**Crystal Mountain
Resort**

Thompsonville, Michigan

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- **Annual MCPA Summer Conference**
- **Annual Risk Management Seminar**



Annual MCPA Risk Management Seminar

October 25 & 26, 2011

**Lansing Community College
Michigan Technical
Education Center
Lansing, MI**

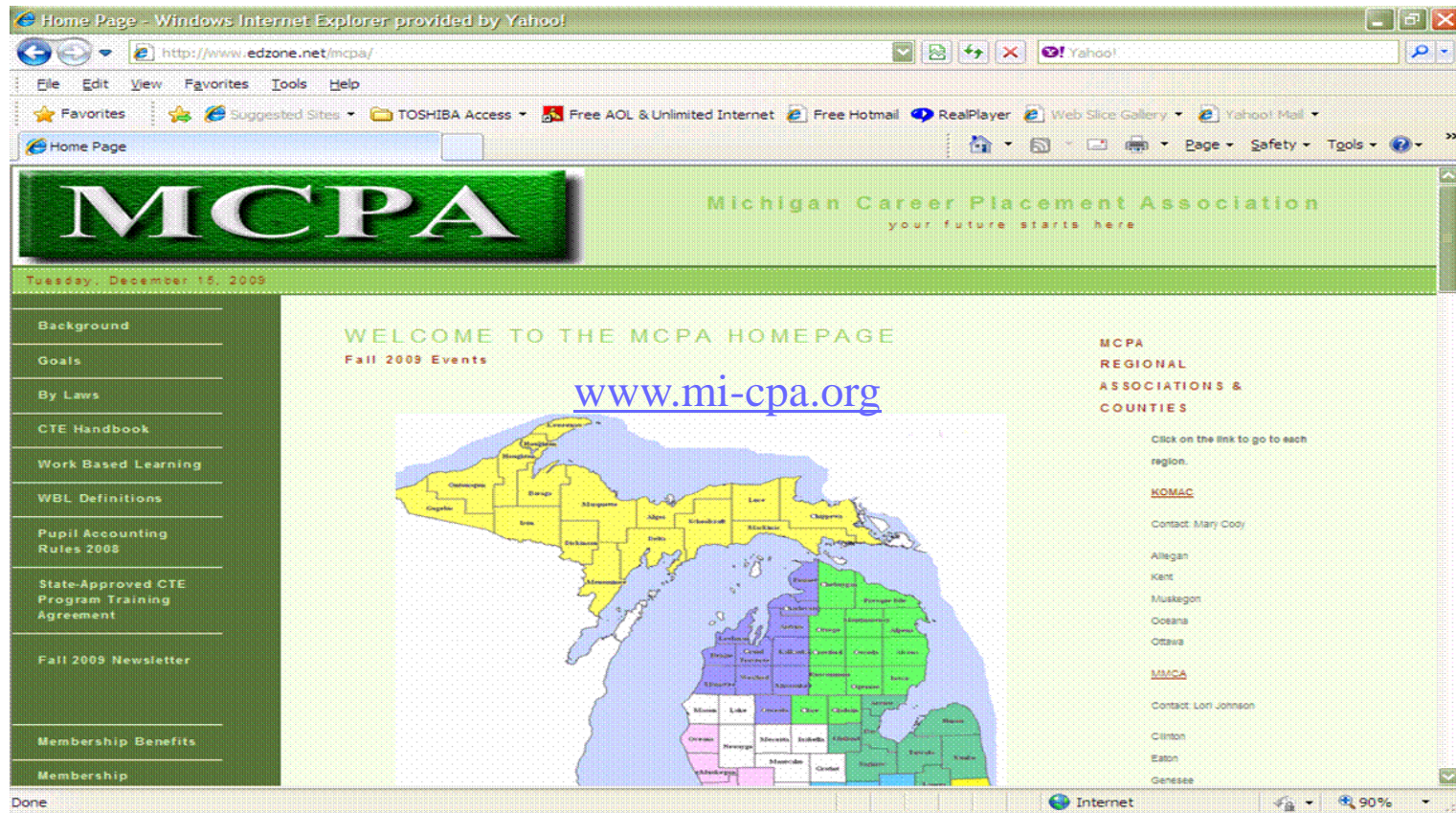


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- **Annual MCPA Summer Conference**
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- We also have a website to assist with locating information or contacting the Board of Directors with questions.



MCPA Website



www.edzone.net/mcpa



www.mi-cpa.org

Wayne Borr

Director of Career and Technical Education
Niles High School
269.683.2894 x 312
wayne.borr@nilesschools.org
MCPA, President - Elect



Wayne Borr

- Sample Training Agreement
- Sample Training Plan
- Required Insurance Fax Sheet
- Business Safety Inspection Sheet
- State / Federal side-by-side Comparison Chart

Sample Training Agreement (State Approved CTE Program)

State-Approved CTE Program Training Agreement Sample: (11/1/07)

School Year: _____

Work-Based Learning Training Agreement/State-Approved CTE Program

[The format of this form is optional and may be adopted or adapted as needed for school district use.]

Student/Learner Information

Last Name: _____ First Name: _____ Middle Initial: ____ Grade (11-12 Only): _____

Home Address: _____ Telephone Number(s): _____

Birth Date: _____ Emergency Contact Information: _____

School District Information

School District Name: _____ School Address: _____

Vocationally Certified Teacher/Coordinator: _____

Telephone Number(s): _____

Employer Information

Name of Business: _____ Supervisor: _____

Address: _____ Phone: _____

City: _____ Zip: _____

Worker's Disability Carrier: _____ Policy No.: (local determination) _____

Liability Insurance Carrier: _____ Policy No.: (local determination) _____

Placement Information

Type of Placement (check one): Paid Unpaid [If this is an unpaid work-based learning experience, specific, unduplicated skills that the pupil will be learning need to be listed on the training plan for each 45 hours of placement.]

Job Title: _____ Date Employment Begins: _____

Appropriate safety instruction has been provided by the school or employer: _____ (initials of coordinator)

Date(s) of Safety Training: _____

Hours to be worked:

	Mon	Tue	Wed	Thu	Fri	Sat	Sun
Earliest							
Latest							

Avg. Hrs. Per Day*: _____ Max Hrs. Per Week**: _____ Starting Wage (if paid): _____

*Cannot compute to more than 1/2 of the pupil's PTE. **Work and school hours cannot exceed 48 hours per week for students under age 18

Number of credit hours to be granted: _____

Name of Related State-Approved CTE Program: _____

**Program serial number (PSN) of related state-approved CTE program: _____

STATE-APPROVED CTE PROGRAM TRAINING AGREEMENT/Page 2

Training Plan

IN ORDER FOR THIS TRAINING AGREEMENT TO BE VALID, A RELATED TRAINING PLAN FOR THE PUPIL BEING PLACED **MUST BE** ATTACHED OUTLINING THE SPECIFIC PERFORMANCE ELEMENTS/JOB SKILLS THAT THE STUDENT WILL BE LEARNING. Attached

Student Responsibilities [Local district determines these responsibilities]

1. Transportation to and from the training site, for the duration of the placement, is the student's responsibility.
2. The trainee must maintain a passing grade in the related course to pass the work experience and remain in the program.
3. Any student who will be tardy or absent from the scheduled work time must notify their employer.
4. Any student who skips school, will have the work based learning placement reviewed and may be removed from the program.
5. Should any problems arise at work or school that may affect the student's placement, the student should notify the coordinator immediately.
6. Students are required to obtain permission from the designated vocationally certified teacher/coordinator before quitting any work-based learning placement.
7. Students are required to complete weekly work hour reports to the coordinator. Failure to complete these required hour reports will result in the student failing the work experience.
8. Students will adhere to all safety requirements specific to this placement as identified by MI-OHSA and their supervisor.
9. Students who are absent from school are not permitted to work that day at their placement and must notify the employer.

School Responsibilities [Local district determines these responsibilities]

1. The placement relates to the student's career/education goals as outlined in their education development plan (EDP).
2. The vocationally certified teacher/coordinator makes at least one visit, every nine weeks, to the training site.
3. The student is regularly supervised by certified staff and provided instruction in areas of skill attainment and work safety.
4. High school completion credit will be granted upon successful completion of the placement.
5. Daily attendance is recorded.
6. The program must not violate the Fair Labor Standards Act and the Youth Employment Standards Act.

Employer Responsibilities [Local district determine these responsibilities]

1. The employer will provide the trainee with the broadest occupational experience in keeping with the job duties listed in the training plan and provide specific instruction on the use of any equipment or materials related to job duties. Documentation of this instruction should be maintained in the trainee's employment file.
2. The employer will ensure the student learner's employment activity is supervised by an experienced and qualified person (work-based mentor), and will complete trainee performance evaluations and verify attendance as required.
3. A written evaluation of student performance will be completed based on the performance elements/job skills listed on the attached training plan.
4. The employer will provide a training site that is free of obvious hazards that could cause potential injury or harm to the student.

The signature of the employer below certifies that the employment of the student learner will conform to all federal, state and local laws and regulations, including those that prohibit discrimination against any applicant or employee because of race, color, religion, national origin or ancestry, age, gender, height, weight, marital status or disability.

Student's Signature _____ Date _____

Parent's Signature _____ Date _____

Vocationally Certified Teacher/Coordinator Signature _____ Date _____

Principal or Designee Signature _____ Date _____

Employer Printed Name and Signature _____ Date _____

NOTICE OF NONDISCRIMINATION: It is the policy of the _____ School District not to discriminate on the basis of race, color, national origin, gender, age, disability, height, weight or marital status in its programs, services or activities. The following person has been designated to handle inquiries regarding the nondiscrimination policies: Administrative Assistant, 222 Education Avenue, _____ MI 48888, (313) 555-8888.



Sample Training Agreement

General Education Program

[School Name]
[School Address • City, State Postal Code]
V: [Telephone] • F: [Fax]

[SCHYr]

[School Name]
[School Address • City, State Postal Code]
V: [Telephone] • F: [Fax]

[SCHYr]

Student Information			
First Name:	Emergency Contact #		
Last Name:			
Street:			
City:	Zip Code:		
Telephone:	Cell Phone:		
Date of Birth:	Age:		
School ID:	Grade:		
School:			
Important Safety Information			
Student learners are required to use safety glasses and other required Safety devices pursuant to MI-OSHA requirements.			
Placement Information			
Capstone WBL	Employment Type:		
Work - Study	Work Permit Required:		
Apprenticeship	Wage:		
On Instruction	Photo release:		
Job Title:	Duration:	to	
Week day	Start time	Ending time	School hours per day
Sunday			
Monday			
Tuesday			Work Hours per day
Wednesday			
Thursday			
Friday			Legal MAX
Saturday			HRs per week
This placement cannot compute more than 50% of the student's FTE.			
Safety Training & Procedures			
Safety of the student learner is our major concern, to the end we as a school district, ask for the employers to help us insure that safety procedures and policies are strongly adhered to. As a school district, we will provide basic work place safety instruction. This will include instruction on blood borne pathogens, safe work habits and fire safety. As a part of that instruction, we ask that the student learner use the following safety devices (safety glasses, face masks, vinyl gloves, safety boots, work gloves, ear protection or respirators) when requested by their employer or when warranted by MI-OSHA. The student's initials below attest that training has been provided and received.			
Safety Training Date:			
Student & Coordinator Initials of School Required Safety Training			
Student Learner Initials	Placement Coordinator Initials		
Date:	Coordinator's Emergency contact number: _____		

Employer Information	
Employer:	
Street:	
City:	
Postal Code:	
Telephone:	Fax:
Supervisor:	
W/C Carrier:	Exp:
Policy No:	Exp:
Liability Carrier:	
Policy No:	Exp:
<i>(Documentation of all safety training and safety procedures for equipment use and tasks should be exhibited in each student file)</i>	
Program Related Instruction	
The employer agrees to employ «First Name» «Last Name» who has successfully completed or is currently enrolled in «Related Class» [PSN: «Prog_SN»] at «The_SCH» for the purpose of receiving training and experience for the following occupational area: «Occupational_Area»	
The trainee needs to work a minimum average of «CH» hours per week to earn educational credit. The undersigned agree to the terms and conditions of this agreement.	
General Duties	
«First Name» will be performing those tasks as assigned by «Gnd» supervisor. These tasks may include, but are not limited to: «Job_Responsibility».	
Persons Approving & Agreeing to this Learner Program	
Student Learner:	Student Learner
Parent / Guardian:	
Employer:	The signature of the employer certifies that the employment of the student learner will conform to all federal, state and local laws/regulations, including those that prohibit discrimination against the employee because of race, color, religion, national origin or ancestry, age, gender, height, weight, marital status or disability.
Employer Supervisor:	
Coordinator:	Coordinator
Principal / Designee:	

Responsibilities for Student Participants:		
<ul style="list-style-type: none"> Transportation to and from the training site, for the duration of the practicum, is the student's responsibility. The trainee must maintain a passing grade in the related course to pass the work experience and remain in the program. All students participating in the Capstone WBL / STW Program must be currently employed in a qualifying related course and working in a career area within their Career Pathway. Should a student fail the related course of study, at the end of the semester, they will lose credit for the Capstone WBL / School-To-Work (STW) experience and will be removed from the program and any release time will be suspended. Any student who will be tardy or absent from the scheduled work time must notify their employer. Any student who skips school, will have the work study experience reviewed and may be removed from the program. Should any problems arise at work or school that may affect the student's placement, the student should notify the Career Prep / STW Coordinator immediately. Students are required to obtain permission from the Career Prep / STW Coordinator before quitting any work study placement. Failure to do so may result in a failing grade for the semester. Secure a signed Training Agreement and have it on file with the Career Prep / STW Coordinator prior to the start of your Capstone WBL / Work Study placement and to receive graduation credit. Should a student be removed from a work study placement, they will be required to spend any release time in a school approved placement. Removal from the work study placement may also result in a loss of credit. Students who are placed on a release schedule are expected to be working during these release hours. Students are required to complete weekly work hour reports to the Career Prep / STW Coordinator. Failure to complete these required hour reports, will result in the student failing the work experience. Students will adhere to all safety requirements specific to their placement as identified by MI-OSHA and their supervisor. Students who are absent from school are not permitted to work that day at their placement and must notify the employer. 	<p>«First Name» «Last Name» acknowledges that I have read and understand the program requirements for my placement.</p> <p>Student Learner Initials above</p>	
Responsibilities for Employers & School District:		
<ul style="list-style-type: none"> The training, even though it includes actual operation of the facilities of the employer, is similar to that which would be given in school where curriculum is followed and students are under the continued and direct supervision of representatives of the school or business. The training is for the benefit of the student. The training does not displace regular employees, but work under their close observation. The employer who provides the training derives no immediate advantage from the activities of the trainee or students; and on occasion operations may be actually be impeded. The trainee or student is not necessarily entitled to a job at the conclusion of the training period. The district certified coordinator makes at least one on-site visit, every nine weeks, to the employer. Students are expected to be scheduled to work during any release hours from school. 		
Evaluation Criteria		
As part of the «Program» Programs, this student will be evaluated in the following areas:		
<ul style="list-style-type: none"> Accuracy of Work Speed Use of working time The handling of responsibility 	<ul style="list-style-type: none"> Initiative and Enthusiasm Attendance Attitude to fellow workers Attitude to Supervisors 	
	<ul style="list-style-type: none"> Personal Appearance Attitude to safety/confidentiality Improvement of job Handling of equipment / property 	
Career Pathway		
<p>NOTICE OF DISCRIMINATION: The Capstone WBL & School-To-Work Career Education Programs of «School» affirm their commitment to carry out its Civil Rights obligation to eliminate discrimination and denial of services on the basis of race, color, religion, national origin of ancestry, age, gender, height, weight, marital status or disability in its programs, services, or activities. The following person has been designated to handle inquiries regarding the nondiscrimination policies: «DChb», «DChd», «SCH_City», MI-«SCH_Zip», «Title»</p>		
Workplace Goals		
Career Exploration «CE»	«WE»	Work Ethics
Workplace Skills «WS»	«ES»	Employability Skills
Student Academic Progress – Counselor Section		
Is the student on track for graduation?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is the student's attendance acceptable?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is the placement related to the student's career goals?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is the student's EOP on file and attached?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Counselor:	Counselor	
[website]		

Required Insurance Fax Sheet

[Home School Name]
[School Address]
[City], MI [Postal Code]
Voice: [Voice Telephone]
Fax: [Fax Number]

REQ Insurance Fax

To: _____ From: _____
Fax: _____ Pages: _____
Phone: _____ Date: 8 January 2010

RE: **Training Agreement Insurance Info**

Urgent For Review Please Comment Please Reply Please Recycle

Confidentiality Notice

This message is intended for the use of the individual or entity to which it is addressed and may contain information that is privileged, confidential and exempt from the disclosure under applicable law. If the reader of this message is not the intended recipient, you are hereby notified that any reading, dissemination, distribution or copying of this communication is strictly prohibited. If you have received this communication in error, please notify us immediately by telephone and return the original message to the address listed above via U.S. postal service. Thank You!

Comments:

As I prepare for the up coming school year, I would like to request updated insurance information for any potential co-op/work study students who will be working with you. This information is required by the State of Michigan for the Capstone WBL / Work Study training agreement being prepared for your student employee. This information is for your protection and that of the student learner you will have working with you. Please supply the information on the form below and fax it to the number listed below as quickly as possible.

Workman's Compensation Carrier: _____
Workman's Compensation Policy Number: _____
Policy Expiration Date: _____
Liability Insurance Carrier: _____
Liability Insurance Policy Number: _____
Policy Expiration Date: _____
Student Wage: \$ _____

After completing, fax to: [FAX Number]



Thank you for your assistance!

Business Safety Inspection Sheet

«Home_SCH»
 «SCH_Address», «SCH_City», MI
 «SCH_Zip»,
 Voice: «SCH_V», Fax: «SCH_F»

«SCHYr»

Employer Safety Visitation Record

Have you had a visit from a MIOSHA inspector in the past five years?

- Yes
 No

Was the company cited for any MIOSHA violations?

- Yes
 No

Notes:

Did the company provide you with their most recent MIOSHA Log 200?

- Yes
 No

Were you provided with the company's Safety Manual?

- Yes
 No

Were you given access to the companies written health programs?

- Yes
 No

Were you able to see the company's rules on safe work practices?

- Yes
 No

Did you observe MIOSHA safety and health related posters?

- Yes
 No

Did you observe the company's commitment to good housekeeping, lighting, etc?

- Yes
 No

Was the company's workplace free from smoke, odors, dust, etc?

- Yes
 No

Were the noise levels in the company's workplace low enough to allow conversation within a reasonable distance from the machinery?

- Yes
 No

Were safety guards and machines properly equipped with safety devices to promote worker safety?

- Yes
 No

Did you see lockable disconnects for machines and circuit breakers?

- Yes
 No

Were the employees provided with and properly using personal protection devices / equipment?

- Yes
 No

Were the employees knowledgeable and comfortable with their work environment?

- Yes
 No

Did the company's management team exhibit pride in their facility and operations?

- Yes
 No



State / Federal side-by-side Chart

Youth Employment Laws Guidelines for Employing Minors

United States Department of Labor
Employment Standards Administration
Wage and Hour Division
Toll Free: 1-866-4US-WAGE www.wagehour.dol.gov
Detroit: 313-226-7447 • Grand Rapids: 616-456-2004

Michigan Department of Labor &
Economic Growth
Wage & Hour Division
www.michigan.gov/wagehour
Lansing: 517-335-0400

In cases where both Federal and State laws are applicable, the business must observe the higher, more stringent standard. For more information on the Fair Labor Standards Act, please contact the U.S. Department of Labor, Wage and Hour Division. For more information on the Michigan Youth Employment Standards Act, please contact the Michigan Department of Labor & Economic Growth, Wage & Hour Division.

AGE	FEDERAL REQUIREMENTS	STATE REQUIREMENTS	STRICTER
14 and 15 years old	May be employed between the hours of 7 am and 7 pm between Labor Day and June 1. Minor shall not be employed more than 3 hours on school days and not more than 8 hours on non-school days or when school is not in session. During the period of June 1 to Labor Day, minor may be employed until 9 pm. Minor may not be employed more than 18 hours a week while school is in session. Minor may not be employed more than 40 hours in non-school weeks. No Federal Standard.	May be employed between the hours of 7 am and 9 pm. Minor shall not be employed during school hours. Minor shall not work more than a weekly average of 8 hours a day, nor more than 10 hours in any day. Combined school and work week shall not exceed more than 48 hours. Minor may not be employed more than 48 hours in non-school weeks. Minor shall not work more than 6 days in any week.	Federal Federal, unless school is more than 30 hours per week State
16 and 17 years old	No hours restrictions. No work week restrictions. No Federal Standard.	Minor may be employed between the hours of 6 am and 10:30 pm Sunday through Thursday and until 11:30 pm on Fridays and Saturdays. Minor may work until 11:30 pm during school vacation periods at least 7 calendar days in length. Minor shall not work more than a weekly average of 8 hours a day, nor more than 10 hours in any day. Combined school and workweek shall not exceed 48 hours. Minor shall not be employed more than 48 hours a week when school is not in session. Minor shall not work more than 6 days in any week.	State State State
Meal/Rest Periods	No meal/rest period requirements.	Minor shall not be employed for more than 5 hours continuously without a documented interval of at least 30 consecutive minutes for a meal/rest period.	State
Adult Supervision	No adult supervision requirements.	Minor shall not be employed unless the employer or an employee who is 18 years of age or older provides supervision. The adult supervisor must be present at all times for the employment of a minor at a fixed site in an occupation that involves cash transactions after sunset or 8 pm, whichever is earlier.	State
Work Permits	No work permit requirement. Record of date of birth is required.	Minor shall not be employed until the person proposing to employ the minor procures from the minor and keeps on file at the place of employment a copy of 1) work permit, or 2) a written training agreement between the employer and the school the minor attends, OR proof of: 1) emancipation, 2) completion of graduation for minors 16-17 years old, 3) proof of passing the G.E.D. for 17 year olds, or 4) approved performing arts authorization.	State

THIS DOCUMENT MAY BE REPRODUCED. IT CONTAINS GENERAL INFORMATION ONLY AND DOES NOT CARRY THE EFFECT OF LAW. PLEASE CONTACT THE FEDERAL OR STATE WAGE AND HOUR DIVISION FOR MORE DETAILED INFORMATION. THIS INFORMATION IS BELIEVED ACCURATE AS OF 10/15/07

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United States Department of Labor
Employment Standards Administration
Wage and Hour Division
Toll Free: 1-866-4US-WAGE www.wagehour.dol.gov
Detroit: 313-226-7447 • Grand Rapids: 616-456-2004

Michigan Department of Labor &
Economic Growth
Wage & Hour Division
www.michigan.gov/wagehour
Lansing: 517-335-0400

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Work Permits	No work permit requirement. Record of date of birth is required.	Minor shall not be employed until the person proposing to employ the minor procures from the minor and keeps on file at the place of employment a copy of 1) work permit, or 2) a written training agreement between the employer and the school the minor attends, OR proof of: 1) emancipation, 2) completion of graduation for minors 16-17 years old, 3) proof of passing the G.E.D. for 17 year olds, or 4) approved performing arts authorization.	State

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Diana Bailey

Program and Placement Specialist,
Michigan Department of Education
Office of Career and Technical Education
517.373.8904
baileyd@michigan.gov
MCPA, State Representative



Diana Bailey

- Pupil Accounting Regulations
- State of Michigan Updates

Kyle Morrison

Q & A with Kyle

Newaygo County RESA

231.924.8826

kmorrison@ncresa.org

MCPA, Regional Rep



Participant Recognition

MCPA Board Members



Sasamon Parker

Closing Comments

- *Have we met the goals that we set?*
- *Have we answered all your questions?*
- *Please -*
 - Complete your conference evaluation form
 - Complete the MCPA membership application form to become member of MCPA (*Free 2010-2011*)
- *On behalf of my fellow presenters & the MCPA have a great day and enjoy the conference!*

