

Career Related Learning Experience (CRLE) Cover Sheet

Fill in the information here, complete the reflection questions, and submit to your advisor or counselor for a final signature.

Name: _____ Date: _____

Advisor: _____ Grade: _____

What did you do? (Check one, or write-in “other”)

- | | |
|--|---|
| <input type="checkbox"/> Mock Job Interview | <input type="checkbox"/> Work Experience |
| <input type="checkbox"/> Career Fair | <input type="checkbox"/> ASVAB |
| <input type="checkbox"/> College Fair | <input type="checkbox"/> FAFSA Application |
| <input type="checkbox"/> Career Informational Interview | <input type="checkbox"/> Industry Tour |
| <input type="checkbox"/> Outdoor School/Camp Counselor | <input type="checkbox"/> College Campus Visit |
| <input type="checkbox"/> Community Service/Volunteering | <input type="checkbox"/> PSAT/SAT/ACT |
| <input type="checkbox"/> Session w/ military recruiter | <input type="checkbox"/> Session w/college representative |
| <input type="checkbox"/> Job Shadow | <input type="checkbox"/> College Applications |
| <input type="checkbox"/> Career Information System Exploration | <input type="checkbox"/> Financial Aid Night |
| <input type="checkbox"/> Job Applications | <input type="checkbox"/> Internship |
| <input type="checkbox"/> College Application | |
| <input type="checkbox"/> Other: _____ | |

What evidence do you have of completion? *(please attach)*

Advisor/Counselor Signature:

Date:

Comments:

