

### **CareerNow Job Shadow Application**

CareerNow Job Shadow provides financial incentives for students to create an opportunity and shadow a professional career mentor. The student will receive a \$500 UIC bookstore credit and the professional mentor will receive a \$500 honorarium for their participation. Both the professional mentor and student are required to submit the following application to be eligible for awards. Below is the application and stated goals and requirements. Completion of application does not guarantee acceptance. Students who fail to meet the requirements outlined below will be ineligible for future CareerNow opportunities. CareerNow Job Shadow is eligible for annual renewal.

#### **Job Shadow Goals:**

- Student will learn more about a career that they are interested in, and see if it is really for them.
- Student will gain an understanding of the skills, education and knowledge necessary to pursue a career in the chosen field.
- Student will actively work one on one with the mentor

### Requirements:

- Current UIC student
- Department of Education application on file
- CareerNOW Checklist on file
- Job-Shadow application on file
- The student must submit a 1-page reflection sharing how the job shadow opportunity influenced their personal, academic and career trajectory
- UIC Non-employee career mentors are required to submit a vendor information form in order for us to distribute funds. UIC employees are ineligible to receive direct distribution and do not need to submit vendor information form.
- UIC employee career mentors need to provide a program university budget code for distribution on the CareerNOW Job Shadow Application



## Native American Support Program

# CareerNOW Initiative Job Shadow Application

General Information	
First Name:	Last Name:
Date:	Student Identification #:
Address:	
Telephone Number:	Email Address:
Anticipated Degree(s) and Minor(s):	
Mentor's Information	
First Name:	Last Name:
Professional Title:	Date:
Agency:	
Agency Address:	
If UIC Employee, please provide program budget code:	
Telephone Number:	Email Address:
Job Shadow Information	
(To be completed by mentor and student)	
Job Shadow Begin Date:	Job Shadow End Date:
Number of Days	Total Number of Hours:
Please list 2-3 agreed upon goals of the placement:	
Certification (Student, Mentor, and CareerNow Staff)	
I certify that the above information is correct to the best of my knowledge and the above objectives are relevant to my career goals.	
Student's Signature:	
I certify that the above objectives represent relevant learning outcomes with respect to the student's	
career goals.	
Mentor's Signature:	
I certify that the above objectives can be accomplished through the CareerNOW Career Shadowing.	
CareerNow Staff Signature:	