

**West Branch High School**  
**14277 Main Street Beloit, Ohio 44609**  
**(330) 938-2183 / Fax (330) 938-4444**

**HOME – JOB AGREEMENT**

I understand and agree that as a condition for participation in the CBI program, the student is permitted to be **only at HOME or WORK during school hours**. I will assume responsibility and exercise reasonable care to ensure that such is the case.

I also understand and agree to the condition that the student is **NOT permitted** to associate with other students when at home during school hours.

Failure to comply with the above will result in dismissal of the student from the CBI program.

\_\_\_\_\_  
Parent or Guardian

\_\_\_\_\_  
Date