



PURPOSE

To document entering into an agreement with a Licensed Blind Operator to provide training for Business Enterprise students in the On-The-Job Training program.

PREPARED BY

Business Enterprise Representative

INSTRUCTIONS

The North Carolina Division of Services for the Blind, The State Licensing Agency and: Enter the name of the Licensed Blind Operator.

This Agreement, entered into this: Enter the two-digit day

Day of: Enter the two-digit month.

20: Enter the two-digit year (Example-07 for 2007, 08 for 2008, 09 for 2009).

By and between the North Carolina Division of Services for the Blind (Hereinafter, the Division), and: Enter the name of the licensed blind operator.

Business Enterprise Representative signs and dates the form.

Operator signs and dates the form.

Witness signs and dates the form.

DISTRIBUTION

Original: Clay Pope, Chief, Business Enterprises
North Carolina Division of Services for the Blind
309 Ashe Avenue – Fisher building
Raleigh, North Carolina, 27606

Copy: Trainer
Business Enterprise Representative