

October 2021

Dear Employer

Year 10 Work Experience: Monday 14 March – Friday 18 March 2022

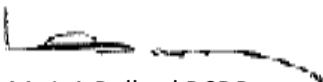
Thank you for agreeing to accommodate our student for Work Experience from Monday 14 March to Friday 18 March 2022. We are grateful to you for providing this invaluable opportunity and we would appreciate it if you could note the following requests:

1. Please complete sections C & D of the Work Agreement Form (attached) and keep a copy for your records.
2. Please read and sign the 'Safeguarding Children Form' (2 copies attached), and return one copy with the Work Experience Agreement Form, **keeping one copy for yourself for reference.**
3. It would be most helpful if you could organise a full programme of activities in order that the student is kept busy for the whole period of work experience. Discussion with the student will help to clarify objectives and set realistic targets. Also, we are aware that some companies may not be open on a particular day during the week; students have been informed that they may be asked to work over a weekend instead.
4. The school insist that all employers have relevant Employers' and Public Liability Insurance and a current pre-placement audit for the period of work experience. If you have not taken part in the Work Experience scheme previously, we will be contacting you to arrange an audit.
5. Employers are now required to provide the school with a brief statement of the health and safety risks attached to the placement, and measures that are taken to control these. Please complete and sign the Risk Assessment Section (attached).
6. We encourage students to meet with the employer before they start their placement and hope this can be arranged. In addition, we ask employers if they can encourage students to record their learning in their Workbook Diary which they will have with them throughout the week.

Thank you again for your support.

If you have any queries please do not hesitate to contact Mrs Neville on 01487 812352 or
Email: careers@abbeycollege.cambs.sch.uk

Yours sincerely



Ms L A Pollard RCDP
Careers Leader

WORK EXPERIENCE AGREEMENT FORM

Monday 14 March – Friday 18 March 2022

This form must be completed and returned **no later than FRIDAY 10th DECEMBER 2021**

A. STUDENT DETAILS

Name..... Form Group.....

Home Address.....

..... Tel. No.....

B. PARENT/CARER'S CONSENT

If you answer 'yes' to any of the following health questions, please provide further details of the condition on this form or an extra sheet of paper.

Please note that the school cannot be responsible for any eventuality arising if you do not provide essential health information that is accurate or up to date. If there is any change in your son/daughter's health condition, you will need to notify us in writing as soon as possible before the commencement of the placement.

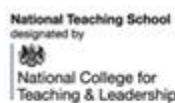
	No	Yes
Have a hearing impairment?		
Have a visual impairment?		
Have food, skin or other allergies? eg nuts or penicillin allergy		
Have any restrictions of normal activities or exercise? eg bronchitis or asthma		
Have any other health problems (including the need for regular medication)?		
Requires assistance with understanding and acting on instructions?		

I have seen and agree with the details of my son/daughter's Work Experience placement.

Signature (Parent/Carer) **Date**.....

I agree to follow all safety, security and other instructions given by the employer, both written and verbal. I also undertake not to disclose any information confidential to the employer without the employer's approval.

Signature of Student **Date**.....



C. EMPLOYER'S DETAILS

Name of Employer.....

Address of Employer.....

..... Postcode

Telephone No.....Email.....

Name of Contact at place of employment

Type of Business

Do you have Employers' Liability Insurance? Yes No

Do you have Public Liability Insurance? Yes No

Name and Address of Insurance Company

.....

Policy Number: Expiry Date:.....

D. PLACEMENT DETAILS

Placement Job Title.....

Type of work to be undertaken by student

.....

Days and Times the student is expected to work

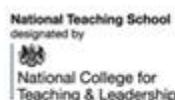
If Personal Protective Equipment is required, please state specific items and whether student or employer will provide.

.....

If the student is to be based in a different location to the company address, please give details

.....

.....



As an authorised representative of the above named employer, I agree to the student named overleaf undertaking work experience with the organisation/company in accordance with the information given in Section D and associated risk assessment.

I confirm that I have read Sections A and B and (if appropriate) undertake to provide the additional support or assistance required by the named student during work experience.

Is the above student known to you? Yes/No

If Yes in what capacity?

If you answered yes to the above would you consider taking a student who is unknown to you in the future?
Yes/No

Signature of Contact/Employer

Date.....

RISK ASSESSMENT SECTION

Name of Student Form Group

Name of Company

When assessing the risks to young people, please take into account their age and inexperience of the working environment. When completing this form, please include risks such as hazardous substances, lifting, working at height and moving vehicles.

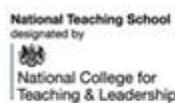
Risks to be aware of:

Measures to be taken to minimise these risks:

Prohibited or restricted area, tasks, or work equipment:

Employer signature Date

Print Name Position



SAFEGUARDING CHILDREN FORM

Child Protection Policy

For adults working with young people, particularly those still of compulsory school age, it is important to be aware of potentially difficult situations. To ensure that the work experience placements that we, as a company offer, are a secure and productive environment for both ourselves and the student, we will follow the simple guidance outlined below:

TOUCH – there may be occasions when you need to touch a young person (eg only when guiding them in carrying out a technical operation) but these should be kept to a minimum.

BEHAVIOUR – whilst it is important to reassure a young person who may be nervous and will be particularly reliant on your guidance, you should avoid being over-familiar. Never permit ‘horseplay’ which may cause embarrassment or fear.

ENVIRONMENT – where possible avoid being on your own in an isolated or closed environment with a young person.

TRAVEL – ensure that there is a known destination and check-in times with a third party in situations where a young person will be travelling alone with an adult during the placement. It is a good idea to make available a mobile phone (or equivalent) in such situations.

MENTOR – care should be taken over the choice of staff having daily responsibility for young people. Those placed immediately in charge of young people should be competent in their work role, mature in their attitudes, and yet, at the same time, be at ease with young people.

INTERNET – ensure that young people are not able to access unsuitable websites or send/ receive inappropriate emails whilst in the workplace.

DISCLOSURE – occasionally young people may disclose confidential information to a work colleague that gives rise to concern for their physical or emotional safety. In such situations you should speak to your line manager and share your concern with the school’s designated safeguarding children/child protection person.

DISQUALIFICATION – you are reminded that you are required by law to protect children from harm and that employees are required, under the Criminal Justice and Court Services Act 2000, to declare if they are disqualified from working with children.

Declaration

I agree to ensure the above guidelines are adopted.

Company Name:	
Signature:	Date:
Print Name:	Position:



EMPLOYER – PLEASE SIGN AND KEEP FOR YOUR RECORDS

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