

Weatherhead

High School

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A high performing academy providing excellence for all

Year 10 Work Experience Self-Placement Form 24th - 28th June 2019

Thank you for supporting Weatherhead High School in
our Work Experience Programme

Email enquiries: whs-workex@weatherheadhigh.co.uk

To Be Completed by Student

Name:

Date of Birth:

Form:

Address:

Phone No:

Name of School: **Weatherhead High School**

Dates of Placement:

Name of Employer:

Name of person contacted:

Position held:

Is this person *A Family Friend?* *A Relative?* *Parents' Employer?* *Neither?*
(please circle)

Type of placement and description of duties:

Student Declaration

I agree to take part in this work experience programme. I also understand that I will be briefed about what employers expect during the work experience, and that I will have the opportunity to raise any concerns or questions I may have prior to undertaking the work experience. I agree to sign a formal agreement, where applicable, regarding Health and Safety and codes of conduct before I can participate in work experience.

Signed: *Student to sign here* _____ Date _____

To Be Completed by Employer

Company Providing Placement

Company Name: _____

Address: _____

Postcode: _____

Phone: _____

On behalf of the above organisation, I agree to offer a work experience placement for the time stated above.

Name _____

Position held: _____

Signed _____

Additional Information

We will consider being added to the Weatherhead High School database

Y

N

We hold current Employers and Public Liability Insurance (where applicable)

Insurance Company Name: _____

Insurance Liability Certificate No: _____

Insurance Renewal Date: _____

(Please attach a copy of Insurance Certificate where possible).

WORK EXPERIENCE LEARNER AGREEMENT

(Please note: Shaded areas to be completed)

TO BE COMPLETED BY STUDENT:

Should you require any further information, please do not hesitate to contact Mrs G Jones, Work Related Learning Co-ordinator.

Student Details:

Student Name:
Name: _____
Form: _____
Telephone / Mobile Number: _____

WORK EXPERIENCE LEARNER AGREEMENT:

The statement below sets out the code of conduct you must agree to before we can place you with an employer. Please read and sign to show you understand it. If you have any questions please ask your teacher or Mrs G Jones.

I understand that undertaking an opportunity at an employer's premises is different to my experience of school. To get the best out of the placement I will have to apply myself and work hard. I understand that I may have more independence and have to take responsibility at times for working on my own initiative. I know that this requires a mature and sensible approach and I understand that I will be expected to behave and work in a way which is acceptable in the work environment. **In particular I will:**

Code of Conduct:

- ❖ Treat all colleagues, customers and property with respect
- ❖ Arrive on time in appropriate clothing with the correct equipment
- ❖ Notify the employer if I am going to be late or absent
- ❖ Be conscientious and take responsibility for my own actions
- ❖ Follow the rules at my work place as set out by the employer
- ❖ Take part in the induction process and follow the rules about Health and Safety
- ❖ Take no part in any bullying, harassment, disruptive behaviour, fighting, graffiti, bad language or any other behaviour likely to cause offence or distress
- ❖ Follow and agree to employer disciplinary procedures. Any major breaches of discipline may result in the termination of your work experience placement
- ❖ Not invite my friends to the employer's premises
- ❖ Return any property (e.g. entry cards) to the employer
- ❖ Complete any paperwork requested of me
- ❖ Discuss any problems I have with my teacher
- ❖ I will not accept lifts to and from the work place by employers of the company
- ❖ I will not make contact with employees of the company via social/media networking websites

Student Declaration:

- ❖ I agree to take part in this work experience programme.
- ❖ I also understand that I will be briefed about what employers expect during the work experience
- ❖ I will have the opportunity to raise any concerns or questions I may have prior to the work experience
- ❖ I agree to sign a formal agreement regarding Health and Safety and codes of conduct before I can participate in the work experience
- ❖ I have read, signed and returned the below forms
 - Self-placement form
 - Parental/Carer Consent and Student Health Declaration Form

Students Signature:

_____ Date: _____