***E*V Placements - Work Experience Consent Form 2018**

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| **Section 1: Learner Details** | | | |
| **School:** | | **Work experience dates:** | |
| **Learner name:** | | **Date of birth:**  **Age:** | |
| **Gender**: Male/Female | | **Form group:** | |
| **Do you have:** | |  |  |
| **Asthma** Yes/No | **Migraines** Yes/No | **Epilepsy** Yes/No | **Diabetes** Yes/No |
| **Hearing** Yes/No  **difficulties** | **Mobility** Yes/No  **difficulties** | **Dyslexia** Yes/No | **Allergies** Yes/No  (please specify below) |
| **Any other condition/illness** (please specify) **……………………………………………………………………………………………………………………………...** | | | |
| I agree to participate in the work experience programme and confirm that I have read and understood the information on this form. I agree to attend my work experience placement every day that I am expected, and to inform the work placement and school if I cannot attend. I will listen carefully and follow instructions. I will observe health, safety and security rules, show respect for others at all times and take care of equipment and property. I will not disclose any information confidential to the employer obtained during this period of work experience. | | | |
| **Learner signature:** | | | |
| **Section 2: Employer Details** | | | |
| **Company name:** | | **Contact name:** | |
| **Address:** | | | **Postcode:** |
| **Telephone no:** | | **Mobile no:** | |
| **Website:** | | **Email:** | |
| **Work experience job title and brief description of tasks:** | | | |
| **Dress code and any special equipment required (eg safety boots/overalls):** | | | |
| **Days of work:** | **Hours of work:** | | **Lunchtime arrangements:** |
| **Is this placement exclusively with one member of staff?** Yes/No | | | |
| As a representative of the above employer, I agree to the learner named above working on my premises in accordance with the Letter of Understanding (see overleaf) and acknowledge my responsibilities under the Health and Safety at Work Act. The learner’s age and inexperience will be taken into account when agreeing tasks, and I understand that the learner must not undertake prohibited activities. I also sign to confirm that:   * I have employers liability and public liability insurance (ELI and PLI) * I have checked the learner is covered by this insurance * I am willing to produce insurance certificates for the health and safety visitor if necessary * I agree to a health and safety check if needed. | | | |
| **ELI policy number:** | | **ELI expiry date:** | |
| **Employer signature:** | | **Position:** | |
| **Name (please print):** | | **Date:** | |

**PLEASE TURN OVER**

**Letter of Understanding for the Employer Providing a Work Experience Placement**

The learner will carry out meaningful work, as described in the agreed job description. The employer will ensure that the work will be planned by a responsible person and the learner will receive appropriate instruction and supervision during the work experience placement.

The employer understands that the learner is to be treated as an employee with respect to Health and Safety legislation. The employer will ensure that the learner does not operate any hazardous machinery, or carry out work of an unsuitable nature, and that any protective clothing/equipment is supplied when necessary with appropriate instruction for its use. Any animals that may cause harm to a learner must be appropriately restrained.

The employer understands his/her duty of care to the learner on work placement, particularly in respect of the principles described in the Child Protection Guidance. The employer also understands that staff members who are disqualified from working with children should be disclosed, as appropriate, in accordance with the Criminal Justice and Court Services Act 2000.

The employer understands that he/she must carry out a risk assessment of the placement and this must be communicated to the parent/carer of the learner who is to undertake the placement, before the placement commences. The employer also undertakes to monitor the placement in the light of the learner’s capabilities and to modify the risk assessment if necessary.

The employer will arrange for Employers Liability Insurance, Public Liability Insurance and Vehicle Insurance, as appropriate, and will confirm that the learner on the work experience placement is covered by the appropriate policies. The employer will accept, or insure against liability for loss, damage or injury caused to or by the learner, while on the placement, just as for paid employees. The employer will notify their insurer of the learner’s participation in work experience.

The employer will observe the relevant legislation laid down in the Health and Safety at Work Act 1974, the Management of Health and Safety at Work Regulations 1999, the Sex Discrimination Act 1975, and the Race Relations Act 1976.

In case of learner absence, accident or sickness, the employer will immediately notify the school. The learner will be allowed to use whatever first-aid facilities the employer provides.

The employer will allow representatives from the appropriate educational establishment to visit the placement for monitoring purposes.

The employer gives permission for the educational establishment or its representatives to process employer personal details for the purposes of work experience and education business link activities, in accordance with the Data Protection Act 1998. Learners’ personal details are confidential and should be safeguarded in accordance with the Data Protection Act 1998.

The learner will not receive any payments for this work in accordance with the Education (Work Experience) Act 1973. The employer may choose to make a contribution directly to the learner towards the cost of meals and travelling. Details will be included in the job description.

The learner will work the hours shown on the agreed job description. These must conform with employment regulations as they apply to Young Persons.The learner agrees that he/she will not disclose any information confidential to the employer and will obey all safety, security and other instructions given by the employer. The learner will be required to sign an agreement to these terms and the learner’s parent/carer will ensure that the learner adheres to this agreement. The learner’s parent/carer will confirm that he/she is not suffering from any complaint which may cause a hazard either to the learner or those working with him/her. The school will advise the employer of any know details concerning the learner which may require special attention to ensure a successful placement.

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| **Section 3: Parental/ Carer Consent** | |
| As the parent/carer of the learner I confirm that I have read the placement details and I am willing for him/her to participate in work experience with the employer for the agreed period of time. I also confirm that the learner is medically fit to undertake the placement and that he/she does not suffer from any medical condition which could result in unnecessary risk to his/her health and safety, and/or that of other people (if in doubt please contact school prior to signing this form).  I confirm that if he/she leaves the employer’s premises during lunch break periods, no liability can be accepted by the employer or the school for any incident that may occur. Parents should discuss the arrangements for lunch and break periods with their child and make sure they are suitable.  I understand that learners are not required to attend school if they are given time off work by the employer during school hours, and that no liability can be accepted by the employer or the school should an incident occur during these periods. | |
| **Parent/carer signature:** |  |
| **Name (please print):** |  |
| **Date:** |  |