**Ormiston Horizon Academy** is committed to providing a safe and valuable work experience for all students. To assist with this, we have created an agreement between all parties to ensure the experience is educational and beneficial for all parties and there is a clear understanding of expectations. This is an agreement of behaviour and performance and failure on any party could result in the placement being terminated.

Please read the following information carefully before completing this form.

Please ensure that all sections are completed. The sections must be completed by the following people:

* Section 1: to be completed by the academy
* Section 2: to be completed by the student
* Section 3: to be completed by the employer
* Section 4: to be completed by the employer and parent/carer
* Section 5: to be completed by the parent/carer

Once all sections have been completed, the form must be returned to Mrs Heath the Careers Coordinator. The deadline for all students returning this form is **Friday 20th May 2022.**

Students returning the form after this date should be aware that it may not be possible to complete Health and Safety checks in time and will therefore be unable to participate in the Work Experience programme.

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| Careers Co-ordinator: Mrs Z Heath  Contact Telephone Number: 01782 883333  e-mail: [zheath@ormistonhorizonacademy.co.uk](mailto:zheath@ormistonhorizonacademy.co.uk) |
| **Section 1: Academy** |
| **Academy Declaration:**  **Ormiston Horizon Academy agrees to:**   * prepare the student for the work place * offer support to ensure the student is suitable for the work place in conjunction with the parent/carer and the business * keep the student, parent/carer and business informed of any changes to circumstances * keep the parent/carer and business informed if there are any absences * support the student and business throughout the placement   **Principals Signature Date** |

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| **Section 2: Student** | | |
| Mr □  Miss □ | First Name: | Surname: |
| Date of Birth: | | Tutor Group: |
| **Student Declaration:**  **Please read and sign**   * I agree to take part in work experience with enthusiasm, a sensible attitude and courtesy for all other workers, customers and members of the public at all times. * I will hold all information I gain about the organisation, it’s customers, associates and suppliers in confidence unless given specific permission to share certain areas of knowledge. * I will act as a junior employee during this week and will follow all the organisation’s rules. I will have a strong regard for my own and others safety and will use safety equipment required. * I understand that there is no payment and all travel and expenses will be met by myself. * If I have any concerns or issues at work I will tell my supervisor immediately. I will carry out preparation work before I start my week of work experience. * I agree to abide by the current Corona Virus regulations in place and inform the employer if I am displaying symptoms. * I understand the placement may not go ahead due to the pandemic.   I have the following difficulties that the employer may need to take into consideration when creating a work programme for me –  **Student to sign: Date:** | | |

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| **Section 3: Employer** | | | | | | | | |
| Organisation Name: | | |  | | | | | |
| Contact Details for Correspondence | | | | | | | | |
| Title: Mr/Mrs/Ms/Dr Other: | | First Name: | | | | | Surname: | |
| Tel: | | | | | | Mobile: | | |
| E-mail: |  | | | | | | | |
| Postal Address:  Post Code: | | | | | | | | |
| Contact Details for Main Supervisor/Manager | | | | | | | | |
| **This is the address where the student will actually be working or based:**  These details will be used to send out the pre-placement letter, reference form and for monitoring the student whilst on placement. If this is the same person as for correspondence, leave blank. | | | | | | | | |
| Title: Mr/Mrs/Ms/Dr Other: | | First Name: | | | | | Surname: | |
| Tel: | | | | | | Mobile: | | |
| E-mail: |  | | | | | | | |
| Postal Address:  Post Code: | | | | | | | | |
| Students Role:  e.g. Teaching Assistant, Shop Assistant | | | | |  | | | |
| Students Job Description Please list the expected tasks | | | |  | | | | |
| **Hours to be worked:**  The student can work up to 40 hours during work experience week, between 6 or 7am and 10 or 11pm.  A 30-minute break is required if working more than 4½ hours.  Please set hours to suit the type of business and the staff who will be supervising the student creating a balance for an interesting but accurate and worthwhile experience. | | | | | | | | Start  BreakLunch Finish |

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| **Section 3: Employer (Cont.)** |
| As a representative of the employer, I agree to arrange the minimum level of support for the student on work experience as follows: -  **Child Protection**   * Sensible steps will be taken to ensure that the student is not working in isolation with one adult for any length of time where this can be avoided. * Should any issues of a child protection nature arise, the appointed Child Protection Officer at school is to be alerted immediately. * Any staff who is disqualified from working with children are required by law to disclose this.   **Health and Safety**   * The student is regarded as a junior employee whilst on work experience and subject to all relevant and current legislation with regard to health and safety. * A risk assessment for the tasks the student is likely to carry out whilst at work will be conducted with particular focus on the maturity, experience and ability of the student. * An induction will be provided on or before the first day, followed by a meaningful programme of work. \*It may be useful to conduct a short interview prior to the placement to access ambition, interests and abilities. * **A risk assessment and Insurance details are to be provided within this document - Failure to provide a Risk Assessment and Insurance details will result in the placement being terminated.** * The student will be under appropriate supervision and given appropriate instruction for all tasks during working times. * The student will be given Personal Protective Equipment or instructed prior to the placement to bring their own where necessary. * Any breach in behaviour standards will result in the student being dismissed.   **Restrictions on Work**  A full list of restrictions and advice suitable for your industry is available from the Health and Safety Executive (www.hse.gov.uk). To summarise, students **must not carry out any work that**:   * Cannot be adapted to meet their physical or mental limitations. * Exposes the student to substances that are toxic or cause cancer, or to radiation. Involves extreme heat, noise or vibration. * Is at a height of over 2 meters on a ladder, scaffold etc. Is in excavations. * Involves driving a vehicle.   **Welfare**   * The students will be given details on what to wear, lunch and break arrangements etc. prior to starting. * No payment will be made to the student. Aid towards food or travel etc. to enhance the placement is acceptable but the organisation is not obliged to do this. * Parents or guardians are responsible for travel to and from the placement. * The academy should be alerted of any issues with behaviour or attitude including absence. |

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| **Section 3: Employer (Cont.)** |

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| **Insurance Checklist**  The academy needs to establish that the employer has the necessary insurance cover and that their insurers have confirmed their acceptance of the additional risk. The students will be deemed to be an employee for the purpose of insurance. Insurance companies will normally not charge companies for the additional risk of students on a placement. Please complete the sections below:  **Name of Company:**  **Contact Name:**  **Contact number:**  **Address of Company:**  **Approx. No. of employees:**  This company carries insurance as detailed below and our insurers have confirmed their acceptance of the additional risk.  **Injury to the student will be covered by your Employers Liability Policy Employers Liability (details to be given below)**  **Insurance Company:**  **Policy Number:**  **Renewal date:**  **Limit of Indemnity:**  **Injury and damage to others caused by the student will be covered by your Public Liability Insurance Policy (details to be given below)**  **Public Liability Insurance Company:**  **Policy Number:**  **Renewal date:**  **Limit of Indemnity:** |
| The organisation I represent has offered the student named above a work experience placement week commencing 4th July 2022.  I will inform the Academy of any issues and any changes in contact name or site address if they arise prior to the starting date.  **Signed:**  **Name of signatory: Date:** |

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| **Section 4: Employer and Parent/Carer** |

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| **Health, Safety & Welfare: Risk Assessment for Young People**  Exchanging the following information is part of the academy’s requirements to ensure that the organisations provide a safe, healthy and secure working environment for each student on Work Experience **Details about the student to be completed by the Parents/Carers:** Student name:  Other information about the students necessary to provide a safe Experience of Work placement. Does the student have a Special Educational Need?  Medical issues and any allergies:  **This section is to be completed by the Employer:**  Name of the person responsible for organising the continuous competent supervision and protection of the student throughout the placement and for ensuring that appropriate induction and training will be provided:  Areas, processes or machinery **which the student will be prohibited from using or will be restricted from accessing,** which I confirm will be notified to them by the responsible person on induction or commencement:  Are there suitable welfare facilities for a student of the above age/sex/mobility? Yes/No Aspects of the work unsuitable for students with a health problem e.g. Asthma, allergies: What risks have been identified under the Management of Health and Safety at Work regulations (young persons) that need to be identified to parents/carers by the academy? **(Please specify if any)**  Will this placement involve the student being alone with an individual member of staff for long periods YES/NO  I/We confirm that all of the above details are a true and accurate record relating to the Experience of Work placement being offered by us, and that I/We have the necessary Public and Employer Liability Insurance required, which will be maintained in place for this and any future placement. (Further information can be found at [WWW.hse.gov.uk](http://www.hse.gov.uk/))  **Signed: Position:**  **Print Name: Date** |

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| **Section 5: Parent or Carer** | | |
| Title: Mr/Mrs/Ms/Dr Other: | First Name: | Surname: |
| **Parent /Carer Declaration:**  **Please read and sign below.**   * + I will allow my child to participate in work experience at the organisation stated above. I will encourage and support my child to make the most of work experience.   + I will inform both the academy and the employer should my child be genuinely and unavoidably need to be absent from work.   + It is important that each child has an experience suitable for their individual abilities. Also, that there is no delay or misunderstanding in treatment should they be ill at work.   I will update the school and employer should any changes to the conditions be noted or any new issues arise.  **Parent to sign: Date:** | | |

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| **Section 6: Academy Careers Coordinator** | | |
| Title: Mr/Mrs/Ms/Dr Other: | First Name: | Surname: |
| **Careers Co-ordinator Declaration:**  **Please read and sign below.**   * + Consent has been obtained from parents for the above-named students to participate in work experience at the organisation stated above.   + The above-named student will be informed of their duties during this work experience placement   + Both the student and the work placement are fully aware to contact the academy in the event of absence, injury or incident that occurs during the period of the placement.   + Information relating to the child in relation to their suitability to their work experience and specific role to be carried out,that may restrict, delay or cause misunderstanding in treatment should the child be ill at work, including any educational, emotional, medical, physical conditions or requirements that need to be taken into consideration have been provided to the work place organisation from the information provided by the parents/carer in section 4 of this form.   + All paperwork is completed and signed   + A work placement assessment has been completed looking at the H&S management of the placement   + The suitability of the student for work experience and tasks to be carried out have been assessed by the academy to allow the placement to proceed.   **Careers co-ordinator to sign: Date:** | | |

THE PLACEMENT

**TERMS OF PLACEMENT**

1.0 The student will carry out meaningful duties as discussed between the academy, student, parent/carer and the placement provider. It is the duty of the placement provider to ensure that all undertaken work is planned and that the student receives a suitable induction, ongoing instruction, and competent supervision throughout the duration of the placement.

2.0 The student will receive no payment for work carried out whilst on placement however, the placement provider may wish to contribute towards the cost of travel and meals although this is not an obligation.

3.0 The student shall only work the agreed hours ensuring that this is in accordance with the employment regulations for young persons.

HEALTH, SAFETY & WELFARE

4.0 A student on a work placement is regarded as a junior employee under health & safety legislation and is owed a duty of care under common law. The placement provider will ensure that the student does not engage in any activities that are unsuitable; given their lack of experience and that they do not operate any hazardous machinery. Personal protective clothing and/or equipment must be provided by the placement provider, along with the necessary instruction in its safe use.

5.0 An assessment of risk must be made by the placement provider in relation to the work experience student’s lack of experience, capabilities, and personal circumstances.

6.0 Under the work experience agreement the student has a legal duty to co-operate fully with the placement provider and ensure that they abide by all procedures pursuant to health & safety.

7.0 It is the responsibility of the parent/carer and/or student to inform the placement provider of any known complaints that may create a hazard to either the student or other persons who may be affected at the placement.

8.0 In case of absence, sickness, or injuries as a result of an accident, the placement provider must inform the academy at the earliest practicable time. First aid provision must be provided by the placement provider.

CHILD PROTECTION

9.0 It is the duty of the placement provider to consider the suitability of staff that work with and/or supervise the student whilst on work placement. In accordance with The Criminal Justice and Court Services Act 2000, it is the duty of the placement provider to inform the school, where known, of staff who are disqualified from working with children.

Insurance/Liability

10.0 In order for a student to be placed with a company for work experience, the said company must ensure that they have Employer’s Liability (Compulsory) insurance, Public Liability insurance, and if applicable, vehicle insurance to cover students placed on work related learning schemes.

11.0 Any loss, damage or injury caused by a student including that to third parties is the liability of the placement provider who will accept or insure against such liability. It is the duty of the placement provider to inform all insurance companies of their participation of a work-based learning scheme.

DATA PROTECTION

12.0 The placement provider gives permission to process personal information for the purposes of work experience and educational business activities, in accordance with the Data Protection Act 1998. Student’s personal details remain confidential and should be safeguarded in accordance with the Data Protection Act 1998 and the latest GDPR regulations

MONITORING VISITS

13.0 The placement provider will permit access to Ormiston Horizon Academy during the placement period for the purpose of monitoring.

STATUTORY OBLIGATIONS

14.0 The placement provider agrees to observe and abide all relevant statutory legislation including the Health & Safety at Work etc Act 1974, legislation in respect equality, and the Children Act.

The academy

# 15.0 Will accept responsibility for placing the student with a suitable employer and will brief the student regarding Health & Safety prior to the commencement of the work experience start date.

16.0 Will maintain its duty of care towards the student whilst on work experience