

Work experience agreement - form

Important information

The work experience agreement form must be completed and signed by the student, host business, parent and school before the placement can commence.

Work experience coordinator details			
Name		Phone	
Email			
Student details and declaration			
First name		Surname	
Date of birth		Gender	
Home phone		Mobile	
Email			
School		Year level	
Medical conditions For example, severe asthma, type 1 diabetes, epilepsy, anaphylaxis or severe allergies			
Medical equipment required			
Medication required			
Certificate or credentials	<input type="checkbox"/> White card	<input type="checkbox"/> Ochre card or WWCC	<input type="checkbox"/> First aid
	<input type="checkbox"/> Drivers license	<input type="checkbox"/> Responsible service of alcohol	<input type="checkbox"/> Police check
	<input type="checkbox"/> Other, please specify:		

<p>I agree to:</p> <ol style="list-style-type: none"> 1. complete the work experience orientation program, including training on work health and safety 2. attend the workplace on the agreed days and hours and promptly notify the workplace supervisor and work experience coordinator of any absences 3. follow all lawful and reasonable directions from the workplace supervisor 4. only use my mobile phone during designated breaks, such as morning tea or lunch 5. perform my duties to the best of my ability 6. dress appropriately and as directed by the workplace 7. adhere to all workplace health and safety requirements, including the use of personal protective equipment, if required 8. take reasonable care of my own health and safety and ensure that my actions do not adversely affect the health and safety of others 9. immediately report any unsafe conditions, hazards, incidents, or accidents to my workplace supervisor and work experience coordinator 10. the information on this form being shared for the purpose of managing my placement. 			
Student name		Date	
Student signature			
Host business and placement details			
Business name			
Workplace address			
Postal address			
Primary activity			
Business contact		Position	
Email address		Work Phone	
Supervisor name		Position	
Email address		Work phone	
Student's working days			
Start date		End date	
Start time		Finish time	

Student certification requirements	<input type="checkbox"/> White Card	<input type="checkbox"/> First Aid	<input type="checkbox"/> Ochre card (WWCC)
	<input type="checkbox"/> Driver license	<input type="checkbox"/> Responsible service of alcohol	<input type="checkbox"/> Police check
	<input type="checkbox"/> Other, please specify:		

Overview of the work experience structure, uniform requirements, and students activities:

High risk checklist – will the student do any of the following while on placement:

work in close proximity to traffic or mobile plant operating on a worksite	Yes/No
operate machinery or equipment which may be dangerous for new or young workers	Yes/No
travel 100km from the workplace address	Yes/No
travel by air on a charter flight or scheduled commercial flight	Yes/No
travel on a domestic, commercial or recreational vessel	Yes/No
operate a golf cart, quad bike, motorbike, tractor, or other farm machinery	Yes/No
work with animals	Yes/No

Host business declaration

I have the appropriate delegation to represent the host business for industry placements and I agree to:

1. comply with the *Work Health and Safety (National Uniform Legislation) Act 2011*
2. allocate a supervisor who is a fit and proper person and understands their obligations
3. ensure the workplace has adequate facilities, including first aid, bathroom facilities, and a break area
4. provide a workplace induction to the student on the first day of placement or prior to them commencing
5. the student only travelling in a registered and insured company vehicle with a licensed driver
6. ensure that the business has current public liability and workers compensation insurance
7. provide and mandate the use of personal protective equipment
8. allow a department or school representative to conduct a site inspection, risk assessment, observation or visit the student in the workplace where necessary
9. report any non-attendance, incidents, accidents or concerns to the school as soon as possible
10. ensure that the supervisor provides instructions to the student that are clear, safe, and within their ability and skills
11. ensure the student does not perform any prohibited activities
12. inform the school if the student is offered ongoing employment where the work hours are during school hours
13. the obligations set out in the Industry Placement Framework and will immediately notify the school if the workpace is no longer able to fully comply with the requirements.

Name		Position	
Signature		Date	

Parent details and declaration			
Name		Relationship	
Work phone		Mobile	
Email			
Permission is given for my child to receive first aid in the case of minor injury			Yes/No
Permission is given to the host workplace to arrange for an ambulance or appropriate emergency medical treatment in the case of injury			Yes/No
I will ensure my child has appropriate transport to and from the workplace			Yes/No
I consent to the use of my child's name and photograph by the host business, school or Department of Education and Training			Yes/No
I confirm my child has a current Medicare cover or private health insurance			Yes/No
I acknowledge that the host workplace employees are not required to hold a current Working with children clearance notice unless the host workplace or its employees are engaged in child related employment as defined by the <i>Care and Protection of Children Act 2007</i> .			Yes/No
By signing, I agree for my child to participate in the work experience placement as detailed in this agreement and for the information on this form to be provided to the host business for the purpose of managing the placement.			
Parent signature		Date	
Emergency contact			
Emergency contact		Relationship	
Contact phone		Mobile	
Does your child have any disabilities or medical conditions? If yes, please specify			

Principal or nominated responsible officer declaration

The Department of Education and Training, through the school, has a duty to ensure, so far as reasonably practicable, that the health and safety of students participating in work experience is not put at risk by their participation or attendance at the host workplace. The school agrees to:

- conduct or arrange a workplace observation or risk assessment of the host workplace, or ensure appropriate risk management strategies are in place prior to the student commencing the placement
- conduct ongoing monitoring of the student's health and safety throughout the placement
- ensure all industry placements align with an educational outcome or support transition beyond school into further employment or training
- allocate appropriate staff to administer and oversee the placement
- ensure students are adequately prepared for the placement and understand workplace expectations, safety protocols, and reporting responsibilities
- provide tailored support to students with disabilities or additional requirements to ensure equitable access to work experience opportunities
- ensure appropriate risk management strategies are applied for placements involving child-related employment, high-risk activities, or vulnerable students
- retain and securely store all documentation related to the placement
- act as the main contact for any concerns raised by the student or host business
- report all student accidents, injuries, and incidents in accordance with the Recording and reporting student injuries – guidelines and procedures
- follow up with students after the placement to reflect on the experience and address any issues.

Student is 14 years of age or older - compulsory	Yes/No
Student has completed the work experience orientation program - compulsory	Yes/No
Relevant staff have been notified of placement dates	Yes/NA
Workplace observation has been conducted	Yes/NA
Risk assessment has been conducted	Yes/NA
Special conditions letter has been signed	Yes/NA
Student's medical or disability requirements has been provided to the host business	Yes/NA
School contact details for the school holidays have been provided	Yes/NA
Student has obtained or is in the process of obtaining their Working with children clearance card	Yes/NA

If either of the below apply, the placement must be authorised by the principal.

- Student is 14 years old
- Student will be engaged in an activity that requires a risk assessment, refer to section 4.4, Risk managed activities, of the Industry Placement Framework.

Principal or nominated responsible officer name		Position	
Signature		Date	

Collection notice

The information collected in this form will only be used for the purpose for which it is being collected. All information will be treated confidentially, stored in a secure location, and destroyed in line with legislated retention and disposal schedules to ensure that every everyone's right to privacy is maintained. For more information, go to the Department of Education and Training's Policy and Advisory Library and read the Privacy Policy.

Further information

This completed agreement must be provided to the school, student, parent and host business prior to the commencement of the placement. For more information contact the student's school, or the Department of Education and Training – Skills NT branch on vetis.det@education.nt.gov.au