WORK EXPERIENCE

SELF PLACEMENT FORM





This form **NEEDS TO BE** returned to school no later than: **21st January 2022**

Please complete **all** sections / Please write **very neatly** or in **capitals** / Please use **blue** or **black ink** only

Student Details					
First Name		**Surname**			
Date of Birth		**Gender**	**F**	**M**	
School	**Urmston Grammar School Yr12**		**Form Group**		
Dates of placement	04 – 08 July 2022 (1 week)				
What, if any is your connection to the organisation? :					

Company Details – To be completed by the Employer				
Company Name				
Nature of Business		**No of Employees:**		
Company Address: Where the placement is taking place, if mobile then registered business address.				
		Post Code		
Contact Details				
Main Contact	**Mr / Mrs / Ms**			
Position				
Email Address **				
	*** Where possible this will be our main form of communication, please monitor your junk / clutter mail for an email from '@ourfutures.co.uk'*			
Phone Number	**Landline**		**Mobile**	
Student Supervisor	**Mr / Mrs / Ms**			
Position				
Email Address**				
Phone Number	**Landline**		**Mobile**	

Work Experience Job Details – To be completed by the Employer					
Job Title		**Department**			
Days of Work **e.g. Mon to Fri**		**Hours of Work** **e.g. 9:00 – 17:00**		**Lunch / break times (duration)**	
Young people should not work longer than 40 hours over a 5-day period on a 7-8 hour day					
Dress Code / Appearance					
Tasks to be undertaken whilst on placement					
Specific requirements					

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Under health and safety law, every employer must ensure, so far as reasonably practicable, the health and safety of all their employees, irrespective of age. As part of this, there are certain considerations that need to be made for young people.

Under the Management of Health and Safety at Work Regulations 1999, an employer has a responsibility to ensure that young people employed by them are not exposed to risk due to:

Lack of experience / being unaware of existing or potential risks and/or / lack of maturity.

Further details of this can be found on the Health and Safety Executive Website:

http://www.hse.gov.uk/youngpeople/law

Taking into account the tasks the student will be undertaking please list any significant Risks / Hazards the student should be aware of, any prohibitions and the Control Measures in place:

Risks / Hazards e.g. Slips and trips, manual handling, equipment, covid.		**Control Measures** e.g. Induction, good housekeeping, supervision, training

Prohibitions for the student (any Areas / Tasks that the student should not undertake / enter. Equipment / Machinery that the student should not use):

Employers Liability Insurance

Please attach a <u>current</u> copy of your Employers Liability Insurance Certificate – this form can't be processed without a copy, <u>if it is due to expire before the student starts we will contact you for the new details.</u>

Unfortunately **only those** employers with Employers Liability Insurance may be used for work experience, with the exception of Crown Indemnity.

We recommend that you inform your insurer that you will be taking a student on work experience.

Protecting your privacy is important to us, by signing this form you are agreeing to your information being held on our database. We will not pass your details on to any 3rd party unless it is in relation to a student you are taking on work experience and we will only contact you in relation to work experience/careers events.

Employers Signature

Please sign to confirm you have agreed to this placement, that the student will receive an induction on the 1st morning and that you are happy for a member of Our Futures Ltd to contact you to undertake a Health & Safety Appraisal on behalf of the school where necessary.	**Print Name**	
	Position	
	Signature	
	Date	

If you have already agreed placements via Our Futures for this school / date, please note this placement would be in addition to those already offered.
Please make a note of the dates you have offered this placement in a diary / calendar.

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