WORK EXPERIENCE

SELF PLACEMENT FORM

Please complete all sections

Please write very neatly or in capitals





Inspiring young people together

Please use **blue** or **black ink** only

Student Details					
First Name		Surname			
		-			
Date of Birth		Gender	F	М	
Please circle					
School	Urmston Grammar School		Form Group		
Dates of placement	4 – 8 July 16 (1 week)				

Company Details – To be completed by the Employer				
Company Name				
Nature of Business				
	-			
Company Address				
			Post Code	
Contact Details				
Main Contact	Mr / Mrs / Ms			
Position				
Email Address **				
	** Where possible this will be our main form of communication			
Phone Number	Landline		Mobile	
			-	
Student Supervisor	Mr / Mrs / Ms			
Position				
Email Address**				
Phone Number	Landline		Mobile	

Employers Liability Insurance				
Insurance Company	Policy Number	Expiry Date		
Please attached a current copy of your Employers Liability Insurance Certificate				
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.				

Please turn over for Job details information

	Work Experience	lob Details -	– To be	completed by the	Employer	
Job Title						
Days of Work e.g. Mon to Fri		Hours of e.g. 9:00 –			Lunch / break times	
Y	oung people should not wor	k longer than	140 hou	rs over a 5-day perio	d on a 7-8 hour day	
Dress Code / Appearance						
Specific requirements						
Tasks to be						
undertaken						
whilst on						
placement						
	hunity have some useful res uk/programmes/workinspira		-		e, these can be found	d on their website
				NIC		
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:						
	f experience / being una		-	-		irity.
1	Further details of this can			•	ecutive Website:	
	• • • •	-		youngpeople/law		
	the tasks the student wi		акіпд р	lease list any signifi	cant Risks / Hazard	as the student
should be aware of and the Control Measures in place Risks / Hazards				Control Measures		
					control measures	
Employors Signatura						
Employers Signature Please sign to confirm you have agreed to Drint Name						
this placement, tha						

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