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## WORK EXPERIENCE

## Provider and Placement Details

### 1 PLACEMENT PROVIDER

Name of Provider (company/organisation/agency) \_\_\_\_\_

Nature of Business \_\_\_\_\_ No. of Employees \_\_\_\_\_

Placement Organiser/Supervisor \_\_\_\_\_

Your Position \_\_\_\_\_

Address \_\_\_\_\_

Postcode \_\_\_\_\_ Tel \_\_\_\_\_

Fax \_\_\_\_\_ Email \_\_\_\_\_

#### Provider:

The name, address, postcode, telephone number and email address of the organisation.

#### Placement Organiser and Position:

The person with the responsibility for work experience within the organisation. Normally this person will be the contact individual that the pupil reports to on the first morning or when placements are being confirmed.

### 2 PLACEMENT DETAILS

Placement Title \_\_\_\_\_

Which section/department will the pupil be working in? \_\_\_\_\_

Description of duties \_\_\_\_\_

Work Times: Start \_\_\_\_\_ Finish \_\_\_\_\_

Lunchtime Duration/Arrangements \_\_\_\_\_

Canteen Facilities Yes  No

#### Title of placement:

e.g. clerical assistant, sales assistant etc.

#### Description of duties:

Details of the types of activities in which the pupil will be involved.

#### Work times:

e.g. Monday to Friday  
9 am – 5 pm

#### Lunch arrangements:

Indicate if you will provide lunch, if canteen facilities are available or if the pupil has to bring his/her own lunch.

### 3 PLACEMENT REQUIREMENTS

Additional Requirements eg Dress Code etc.

\_\_\_\_\_

\_\_\_\_\_

#### Placement requirements:

Please indicate any extra details e.g. special clothing requirements, dress code, pre-placement interview, school subject requirements e.g. English, math, biology.

4 PROVIDER'S RISK ASSESSMENT		
Has a Risk Assessment been carried out of the activities in which the pupil will be involved and any other process, procedure or environmental factor by which they may be affected (for guidelines see <a href="http://www.hse.gov.uk">www.hse.gov.uk</a> )	Yes <input type="checkbox"/>	No <input type="checkbox"/>

**Risk Assessment:**  
By law a company with 5 employees or more should have a Health and Safety Policy which contains a statement of general policy on health and safety at work and the organisation and arrangements for putting that policy into practice.

5 PROVIDER'S HAZARDS IDENTIFICATION				
	Yes	No	Yes	No
<b>Slips/Trips/Falls?</b> <i>(Spillages, trailing cables/flooring)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Hazardous substances?</b> <i>(Cleaning products/oils, etc)</i>	<input type="checkbox"/>
<b>Falls from height?</b> <i>(Platforms/ladders/fragile surfaces)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Pressure Systems?</b> <i>(Gas/air/ receivers/steam boilers)</i>	<input type="checkbox"/>
<b>Display screen equipment?</b> <i>(Computers/cash register)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Equipment/Machinery?</b> <i>(mechanical/electrical)</i>	<input type="checkbox"/>
<b>Electricity?</b> <i>(Mains operated &amp; portable appliance)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Transport?</b> <i>(Fork lift trucks/Cars/HGV etc)</i>	<input type="checkbox"/>
<b>Noise?</b> <i>(Machinery/tools/equipment/environment)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Radiation?</b> <i>(X-Ray/UV/lasers/radioactive materials)</i>	<input type="checkbox"/>
<b>Vibration?</b> <i>(Machinery/transport/powered hand tools)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Asbestos?</b> <i>(Building maintenance/vehicle repairs)</i>	<input type="checkbox"/>
<b>Working with animals?</b> <i>(Farm/domestic/wild)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Manual Handling?</b> <i>(Lifting/carrying/pushing/pulling etc)</i>	<input type="checkbox"/>

**Hazards:**  
Please use this checklist to help you identify any significant hazards. Once you have done this it is important to have control measures in place to minimise any associated risk. As well as induction and supervision, control measures may include training, protective equipment or clothing etc.

5a PROVIDER'S CONTROL MEASURES (Highlight Hazardous Equipment)
Identify what pupils can and can't use:-

**Control Measures:**  
Our Health & Safety Officer will call on you to arrange a visit. The Health & Safety officer will work with you to help you meet your duty of care.

5b PERSONAL PROTECTIVE EQUIPMENT
Please list all that may be required:-
Will this PPE be provided by you? Yes <input type="checkbox"/> No <input type="checkbox"/>

**PPE:**  
If an identified control measure is to wear or use protective clothing or equipment, please specify what is required e.g. a hard hat, safety boots or special eyewear and whether you will provide this?

6 INSURANCE DETAILS (please enclose a copy of current policy)	
Does the company have Public & Employers Liability Insurance? A certificate should be clearly displayed where it can be seen by employees.	Yes <input type="checkbox"/> No <input type="checkbox"/>
Name of Insurance Company _____	
Insurance Policy Number _____	
Date of Expiry _____ Indemnity Limit _____	
Is your policy renewed automatically annually?	Yes <input type="checkbox"/> No <input type="checkbox"/>

**Insurance:**  
Please refer to the letter of understanding. There must be Public and Employers Liability Insurance cover over the period of the placement.

**7 SCHOOL CALENDAR 2017/2018 (Please tick suitable dates)**

WEEK NO	DATE	EAST SCHOOLS	<input type="checkbox"/>	NORTH SCHOOLS	<input type="checkbox"/>	SOUTH SCHOOLS	<input checked="" type="checkbox"/>
4	04.09.17	Stewarton Academy				Girvan Academy	
5	11.09.17	Stewarton Academy				Girvan Academy	
6	18.09.17	Kilmarnock Academy		Greenwood Academy		Belmont Academy	
7	25.09.17	Kilmarnock Academy		Garnock Academy			
		Cumnock Academy		Greenwood Academy		Belmont Academy	
8	02.10.17	Grange Academy		Auchenharvie Academy		Marr College	
		Cumnock Academy				Prestwick Academy	
9	09.10.17			Auchenharvie Academy			
10	16.10.17						
11	23.10.17	Auchinleck Academy		Irvine Royal Academy			
				Largs Academy			
12	30.10.17	Auchinleck Academy		Largs Academy		Ayr Academy Girvan Academy	
14	13.11.17	Doon Academy		Ardrossan Academy		Ayr Academy	
						Doon Academy	
15	20.11.17	Doon Academy				Doon Academy	
16	27.11.17					Prestwick Academy	
18	11.12.17			Greenwood Academy			
26	05.02.18	Grange Academy		Ardrossan Academy			
		Cumnock Supp Learning					
28	19.02.18			Greenwood Academy			
29	26.02.18	James Hamilton Academy					
30	05.03.18	Park School		*Extended Outreach		South Craig Campus	
		James Hamilton Academy					
31	12.03.18	Park School		*Extended Outreach			
37	23.04.18					Prestwick Academy	
38	30.04.18					Carrick Academy	
39	07.05.18	Auchinleck Academy		Greenwood Academy		Carrick Academy Queen Margaret Acad	
				Irvine Royal Academy			
				Kilwinning Academy			
				Garnock Academy			
40	14.05.18	*St Joseph's		James Reid Academy			
		Auchinleck Academy		Irvine Royal Academy		Belmont Academy	
		Cumnock Supp Learning		Garnock Academy			
				Kilwinning Academy			
41	21.05.18	*St Joseph's		*St Matthew's Academy			
				James Reid Academy			
42	28.05.18			*St Matthew's Academy			
43	04.06.18			Arran Academy			
44	11.06.18	Loudoun Academy		Arran Academy			
45	18.06.18			Ardrossan Academy			

**Calendar:**

Please complete the school calendar marking clearly which school(s) and week(s) you are able to accommodate.

**Please take into consideration when selecting dates and schools:-**

*\*Doon Academy is an East Ayrshire school; however pupils can travel to South Ayrshire placements with more ease.*

*\*Extended Outreach works with North Ayrshire S1-S4 pupils who have personalised education provision working in partnership with mainstream schools.*

*\*Queen Margaret Academy has many pupils who travel from the Girvan area.*

*\*St Joseph's Academy has many pupils from Cumnock and the surrounding areas.*

*\*St Matthew's Academy pupils come from all over North Ayrshire.*

Would you offer a more FLEXIBLE placement? eg. 1 day a week, 2hrs a day Yes  No

Please note which school/s \_\_\_\_\_

**FLEXIBLE PATHWAY INITIATIVE** is a targeted programme to engage our most vulnerable young people, ensuring they move into a positive destination. It consists of a 10 week work placement, 3 days per week.

Interested in finding out more? Yes  No

Would you accommodate more than 1 pupil at a time?

Yes  No  Number: \_\_\_\_\_

Would you consider having an additional support needs pupil?

Yes  No

Are there specific times we should not contact you? \_\_\_\_\_

## 8 PROVIDER/EMPLOYER - CHECKLIST

(Please tick box if Yes)

You are clear about the purpose of Work Experience Placements	
You are able to offer an induction programme for pupils taking up your offer of a placement.	
You know who to contact should you require support or advice about any issue relating to the placement.	
You have identified a range of appropriate activities for the pupils to do during their time with you.	
You aim to have a feedback session with the pupil before the end of the placement.	

**Please note:** if you haven't received a letter from the school 2 weeks prior to your offered date then no pupil will be attending.

**We would welcome your comments on the elements of work experience that you believe make it most meaningful for young people:-**

## 9 ACCEPTANCE AND AGREEMENT

I confirm that -

- I have read the attached letter of understanding between the councils and this firm/organisation, and agree that all points are acceptable to me and I have taken all appropriate action.
- This company's Public and Employers Liability Insurance have confirmed they will cover a pupil for the duration of his/her Work Experience Placement and a copy of this policy is enclosed.
- The pupil will receive induction and instruction, which includes Health & Safety issues covering identified hazards and control measures, by a competent person.
- The pupil will be supervised at all times.
- The details provided may be held on a database to support Work Experience and other similar activities.

Name of organisation \_\_\_\_\_

Signed \_\_\_\_\_

Position \_\_\_\_\_ Date \_\_\_\_\_

**The Work Experience Programme is a very valuable exercise for all our pupils and is very beneficial to them in their preparation for the world of work.**

**Thank you for completing this form. Your participation in the Work Experience Programme is very much appreciated.**