

27 November 2024

Dear Parent/Guardian

YEAR 10 WORK EXPERIENCE 2025

As I am sure you are aware, Priory has traditionally run a full week work experience placement for all pupils in Year 10.

The Year 10 work experience programme will run from Monday, 10 February to Friday, 14 February 2025.

Pupils will be expected to complete a self-placement, attend an interview and complete five full days of work experience.

In this pack you will find the following:

- 1 x Self Placement Form and Placement Agreement
- 1 x Employer's Undertaking Agreement
- 1 x Pupil's and Parent's Undertaking Agreement
- 1 x Checklist

Pupils and/or employer must complete and sign all four forms **and also obtain a copy of the Employer's Liability Insurance document.**

All five documents (three sheets, checklist and a copy of the Liability Insurance) must be **returned to the school office by Friday, 31 January** so that the relevant visits for risk assessments and the collation of paperwork needed prior to placement can be completed.

For primary school placements, pupils must not make direct contact with the school but instead provide a letter of application to me providing the name of the primary school and explaining why they wish to carry out work experience there.

For placements that are considered to be high risk by the school, a parental contribution of £35 may be needed so we can employ an external risk assessor to assess the work placement. If a placement is deemed to be low risk no contribution will be required.

This is a wonderful opportunity that Penwortham Priory Academy is continuing to offer for all pupils in Year 10 and we would like to thank you in advance for working with us to make it yet another successful programme.

If there are any questions, you can contact me via email at v.eastham@priory.lancs.sch.uk

Yours sincerely



Mrs V Eastham
Head of Year 10
Work Experience Co-Ordinator

Form 1 - Self Placement Form and Placement Agreement

Dates of Work Placement – Monday, 10 February to Friday, 14 February 2025

Pupil NameForm

Parent Contact Name and Number.....

.....

Employer Company Name

Placement Address

.....

.....

Post Code

Name of Contact/Position in Company

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Employer Tel No

Employer Mobile Tel No

Employer Email Address

Work Placement Job Title

Brief Description of Duties

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Form 2 - Employer's Undertaking Form

I confirm that:

- We have full and up to date public liability insurance.
- We have employer's liability insurance and will provide the school with the details.
- We will take all possible care of the pupil's health and safety, recognising his/her inexperience of the workplace, immaturity and lack of awareness of risks.
- We will ensure that the pupil performs meaningful work as previously agreed in the job description.
- We are an equal opportunities employer.
- We will not discriminate on the grounds of gender, race, disability, religion, age or sexual orientation.
- We will inform the school immediately should we for any reason have to send the pupil home or if the pupil does not arrive for work without us being contacted.
- We will inform the school of any absence by the pupil as soon as possible so that school can investigate the pupil's safety and whereabouts.
- We will inform the school immediately if the pupil has any sort of accident in the workplace.
- The school will maintain contact with the pupil and the employer for the duration of the placement.

A copy of the Employer's Liability Insurance document is required to be kept by school.

According to the Health & Safety Executive Regulations, those under the minimum school age on approved work experience schemes have different employment rights from adult workers and are subject to the following protection in respect to the hours that they can work.

- A limit of 8 hours working time a day and 40 hours a week.
- Not to work either between 10pm and 6am or between 11pm and 7am.
- They must be allowed 12 hours rest between each working day.
- They must be given 2 days weekly rest and a 30 minute in-work rest break when working longer than four and a half hours.

***** PLEASE ATTACH A COPY OF YOUR EMPLOYER'S LIABILITY INSURANCE CERTIFICATE TO THIS FORM *****

Signed Date

Name and Position in Company.....

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Form 3 - Pupil's Undertaking Form

I agree that:

- I will follow all safety, security and other rules and regulations.
- I will not disclose any confidential information which I may obtain during my placement.
- I will notify the employer and school immediately if for any reason during my placement I am unable to attend.

Signed by Pupil.....

Date

Print Name

Form.....

Parent's/Guardian's Undertaking

I agree that the above pupil may take part in the work experience programme. I have seen and I understand all conditions in the job description.

Does he/she suffer from any medical conditions which may affect his/her health and safety, or the safety of others whilst on this placement?

YES/NO

If **YES** please give details below. This information will be passed onto the employer for safety reasons.

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Attendance and punctuality must be recorded for school administration.

ANY ABSENCES MUST BE REPORTED TO SCHOOL ON THE DAY, BEFORE 9AM, BY TELEPHONING 01772 320250 Option 1 (Pupil Absences)

Any early departure or planned absences must have school permission prior to the event. Any absences without permission will incur an unauthorised absence being recorded.

Comments:

Signed by Parent/Guardian

Print Name.....

Date.....

Work Experience Checklist

**ALL COMPLETED DOCUMENTS MUST BE RETURNED TO THE SCHOOL OFFICE BY
FRIDAY 31 JANUARY 2025**

Pupil Name

Form

Please ensure all of the following documents are enclosed in the plastic wallet and indicate this by ticking the corresponding box.

- Form 1 - Self Placement Form and Placement Agreement

- Form 2 – Employer’s Undertaking Agreement

- Form 3 - Pupil’s Undertaking Agreement

- Copy of the organisation’s Employer’s Liability Insurance