



WORK EXPERIENCE 3-WAY AGREEMENT FORM

Student, Parent and Employer

Please read p.2, complete ALL fields and sign, before returning to Miss Gale - Careers

STUDENT DETAILS

Name: _____ Form Group: _____
 School: St Joseph's Catholic School Placement Period: Monday 23rd June – Friday 27th June 2025

EMPLOYER DETAILS

Company: _____ Contact Name: _____
 Address: _____ Mobile/Direct Line: _____
 _____ Email: _____
 Postcode: _____

Placement Job Title and Brief
 Description: _____
 Hours of work: _____

For a company to take a student on work experience they **MUST have** Employers Liability Insurance (ELI) and Public Liability Insurance (PLI). Please provide us with the following details:
Insurance Company: _____
Policy Number: _____
Expiry Date: _____

STUDENT

As the **student named above**, I agree to:

- Attend this work experience placement and understand that any information obtained about the employer's business is held in confidence and will not be disclosed without the Employer's permission.
- Adhere to all safety, security and requirements identified by the Employer 's representatives or by displayed instructions.

Signed: _____ Date: _____

PARENT/GUARDIAN

As parent/guardian of the above, named student, I confirm I have read and understood this form and any accompanying documents.

I agree to the student attending this placement and confirm that: (* **Please delete as appropriate**)

- * They **do not** suffer from any medical conditions.
- * They **do** suffer from a medical condition which will be shared with the employer, details provided.

Signed: _____ Date: _____
 Printed Name: _____ Relationship to student: _____

EMPLOYER

As representative of the employer I agree to the student named above working on my premises in accordance with the Letter of Understanding, p.2. We agree to abide by all relevant/current legislation including Health and Safety, Data Protection Act, Sex Discrimination, Race Relations, Disability, and the Children's Act. We will ensure that our Employer's Liability Insurance will be in place to cover the student and will accept or insure against liability for loss, damage or injury caused by the student, in the same way as for paid employees. I understand that all the information provided will be shared in pursuit of educational activities and services and held in accordance with the current Data Protection Act and General Data Protection Regulations (GDPR).

Signed: _____ Date: _____
 Printed Name: _____
 Position: _____

This form must be signed and returned to the school on or before: Monday 31st March and latest by Tuesday 22nd April 2025

LETTER OF UNDERSTANDING (Please read all sections carefully)

This work experience is co-ordinated by SWEP & St Joseph's Catholic School in line with the national curriculum objectives and Gatsby Benchmarks to help young people gain skills for life. All students, parents and employers MUST read the below before signing this form on p.1.

OPPORTUNITY

1. The learner will carry out meaningful work, as described in the job description discussed. We will ensure that the work will be planned by a responsible person and the learner will receive appropriate induction, instructions, and supervision during the period of the work experience.
2. Pre 16 and Post 16 students attached to a school's work experience programme will not receive any payment for this work, in accordance with the current Education Act.
3. Young Workers Directive limits time to 8 hours a day and max 40 per week, normally these can be between 6am–10pm. Specific arrangements will need to be put in place between the school, parents and employer, for placements that occur outside of 8am–8pm or at weekends. This is particularly important for learners under the age of 16. Please speak to school to discuss this.

HEALTH, SAFETY, WELFARE AND SECURITY

4. We recognise that a learner on work experience is regarded as an employee for the purposes of Health and Safety legislation and the associated duty of care. We will ensure that the learner does not operate any hazardous machinery, or carry out work of an unsuitable nature, and that any protective clothing/equipment is supplied where necessary and instruction given on its use.
5. We recognise the need for risk assessments to be carried out for learner before the placement, and that these are communicated to the parent/guardian. Where the significant risks have been recorded on the job description, we would expect the Educational Establishment to pass this information onto the learner/Parent/Guardian. We also agree to undertake, monitor, and modify risk assessments for the placement to take account of an individual student's capabilities and any changes to working practices.
6. We will expect the learner/parent/guardian/Educational Establishment to inform us of any medical or other condition so that we can adjust our risk assessments and/or tasks accordingly. Parents, students and employers will ensure the "**Health & SEN declaration form**" is completed and signed to acknowledge any specific adjustments that may need to be made for the student.
7. In case of absence, accident, or sickness we will immediately notify the learner's educational establishment: 01722 335380. The learner will have access to welfare and other staff facilities including first aid. Any accidents will also be logged as per the employers' usual company procedure.

SAFEGUARDING

8. We accept and understand the duty of care in respect of safeguarding of young people and will consider the suitability of staff who works with them. We will disclose staff, where known, who are disqualified from working with children, where appropriate, in accordance with The Criminal Justice and Court Services Act 2000 and Protection of Children Act 1999.

INSURANCE

9. We maintain Employers and Public Liability Insurance policies, as required to indemnify our business. We will ensure that these policies are current, in place for any period during which we have learners on placement and that this will cover the learner. We will (as for any paid employee) accept or insure ourselves against the loss, damage or injury caused by the learner whilst a work experience employee of the company.

DATA PROTECTION

10. We will safeguard all learner details and keep them confidential in accordance with the current Data Protection Act and in compliance with the General Data Protection Regulations (GDPR and relevant UK registration).
11. The learner will be reminded by the Educational Establishment that they must not disclose any information confidential to the Employer without the employers' approval.

STATUTORY OBLIGATIONS

12. The employer agrees to observe all relevant/current legislation, relating to Health & Safety, and legislation in respect sex discrimination, race relations, disability, and the Children Act.

Veryan in conjunction with SWEP Group and St Joseph's will hold all company and individuals' details on the work experience database, run by Veryan, for the pursuit of educational activities and services, in accordance with the current Data Protection Act.

If you wish your details to be removed please email: Kim.Brydon@yeovil.ac.uk or rebecca.cody@yeovil.ac.uk SWEP contacts.