

## Work Experience Arrangement Form

Education and Training Reform Act

Ministeria

STUDENT AGREEMENT	
I,	agree to take part in this Work Experience Arrangement and to:
	carry out all reasonable and lawful directions of the Employer and perform my work to the best of my ability;
	comply with all reasonable workplace rules and requirements governing safety and behaviour;
	attend at the workplace on each day at the agreed time;
	inform both the Employer and the Work Experience Coordinator as soon as possible if I am unable to attend work;
	promptly inform the Employer of any accident, injury or incident that may occur;
	dress appropriately for the workplace.

agree that no payment will be made to me if the placement is with a Commonwealth Department or a body established under a Commonwealth Act; give my consent to donating back payment where the placement is with an organisation engaged wholly or mainly in an educational, charitable or community

## welfare service not conducted for profit and where I have determined that the whole of my payment will be donated back to the organisation. Students aged 18 years and over:

I agree to inform the Employer of any necessary medical information, including details of any known medical condition which may affect me and any medication or treatment which may be relevant.

I understand that I am responsible for my transport to and from the workplace.

I understand that the Principal will determine whether or not I will undertake Work Experience. I acknowledge that prior to commencing the placement under this Arrangement I will complete the occupational health and safety program required by the Department of Education and Training.

Student's signature \_\_\_\_\_ Date / /

I, \_\_\_\_\_\_ consent to my child taking part in this Work Experience Arrangement and I: agree that he or she will be subject to the direction and control of the Employer and nominated Supervisor(s); understand that all reasonable care for the health and safety of my child will be taken by the Employer and nominated Supervisor(s); expect my child to comply with all reasonable workplace rules and requirements governing safety and behaviour; understand that I am responsible for my child's transport to and from the workplace:

agree that no payment will be made to my child if the placement is with a Commonwealth Department or a body established under a Commonwealth Act; give my consent to my child donating back payment where the placement is with an organisation engaged wholly or mainly in an educational, charitable or community welfare service not conducted for profit and where my child has determined that the whole of his or her payment will be donated back to the organisation;

understand that I will be notified as soon as possible in the event of illness of or accident to my child, but where it is impracticable to communicate with me I author3741(d)3.44001()-5.74i65872(i)-2.0126(d)3.tl