



**Dear Parent**

**Please read the following Letter of Understanding prior to your child starting their placement. It sets out what the employer is asked to provide and also your responsibilities. If you have any questions please feel free to contact me on 01489 892256 or via email careers-help@swanmore-sec.hants.sch.uk**

**Andrea Illsley Careers Leader**

**Letter of Understanding between Swanmore College and Employers Providing Work Experience**

To ensure that the principle conditions of the Work Experience Programme and the arrangements between the Employer and Swanmore College are fully understood, Employers are asked to read the following essential points.

1. The student will carry out worthwhile and meaningful work, as described in the agreed job description. The Employer will ensure that the work is planned by a responsible person. The student will be given an effective Health and Safety induction before starting work and will receive appropriate instructions and supervision during the period of work experience.

2. Supervision will be provided by a suitable, responsible and competent named person.

3. The Employer will ensure that the student does not operate machinery unless adequate instruction and competent supervision can be provided in order for it to be used safely. The Employer shall not require the Student to carry out work of an unsuitable or inappropriate nature. The Employer will ensure that the Student wears protective or special clothing/protective equipment as and when necessary. All prohibitions will be recorded on or attached to the Job Description / Health and Safety Statement.

4. The Employer will inform Swanmore College if there have been any significant changes since the last use of the work placement.

5. The Student will not receive any payment for their work. Employers are not obliged to assist with expenses but may, if they so wish, make a contribution directly to the Student towards the extra cost of meals and travel expenses.

6. The Student will work the hours shown on the Work Experience Own Placement Form / Agreement Form.

7. The Student will be required by Swanmore College to sign an Agreement stating that they will

* not disclose any information confidential to the Employer
* follow all safety, security and other instructions given by the Employer
* pass on to their parents or guardians any information from the Employer regarding arrangements for their personal health, safety or welfare (including Risk Assessment information)

8. The Student’s parent or guardian will confirm that they do not suffer from any complaint which may cause a hazard either to the Student or those working with him or her. The school will be required to inform the Employer of any known details requiring special attention in order to secure a successful placement.

9. The Employer undertakes to ensure appropriate Employer Liability Insurance cover against accident or injury caused to the Student by the negligence of the Employer or the Employer’s servants. The Employer will accept (by way of insurance or otherwise) liability for loss, damage or injury caused by the Student in carrying out the tasks allocated to her/him in accordance with the Employer’s instructions.

10. All parties, in accordance with normal practice, will observe all current relevant legislation, including approved codes of practice relating to Health and Safety, Equal Opportunities and Child Protection.

11. The Employer will provide a safe and healthy working environment which covers

Welfare facilities Emergency Arrangements

Equipment Risk Assessments as necessary

Safe Systems of work

12. The Employer agrees to provide reasonable access for the purpose of monitoring the student.

13. In cases of accident or sickness occurring to the Student whilst under the supervision of the Employer, the Student will be allowed to use whatever first aid facilities the Employer provides. The Employer will notify Swanmore College without delay and arrange for appropriate action to be taken.

14. The Employer will provide Swanmore College with an accident report, in writing, following any accident which causes injury to a Student on work experience and will report the accident to the enforcing authority, if appropriate, within the time limit stipulated.

| **EMPLOYER CONFIRMATION AND AGREEMENT** |
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| I confirm that: - to the best of my knowledge and belief, the information given to the school regarding the placement is correct.  - I have read the attached Letter of Understanding and that all the points are acceptable to me.   - I confirm that the Job Description is correct.  As representative of the employer I agree with the student named above working on our premises, and to abide by all legislation relating to Equal Opportunities, Health and Safety and Child Protection. I will arrange for my Employer’s Liability Insurance to provide cover against accident and injury caused to the student by negligence of the employer or another employee and will accept or insure myself against liability for loss, damage or injury caused by the student in the same way as for other paid employees. My company/ organisation has prepared a Young person Risk Assessment, in addition or as part of our current workplace Risk Assessment (if applicable) and a safe system of work which covers all the tasks we expect this student to undertake. |

**STUDENT**

| As the student named I agree to take part in this work experience programme. I also agree to hold in confidence any information about the employer’s business which I may obtain during this work period and not to disclose such information to any other person without the Employer’s permission. I also agree to observe all safety, security and other regulations laid down by the Employer and made known to me either by the Employer’s representative or by the displayed instructions. I will pass on to my parent or guardian any information, given to me by my employer, which may affect my personal health, safety or welfare. |
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**PARENT / CARER with legal responsibility for the student**

| As parent / carer of the student named above I confirm that I have read and understood this form, and the Job Description and Health and Safety Statement. I agree to his/her taking part in this programme and undertake that he/she will observe the conditions set out above. I confirm that he/she does not suffer from any medical or other condition which could result in unnecessary risk to his/her health or safety or to the safety of another person. (Should you be in any doubt please consult the teacher responsible before signing this form).  I confirm that if he/she leaves the employer's premises during lunch or break periods, no liability can be accepted by the employer or the school for any incident that may occur. Once on the placement, parents should discuss the arrangements for lunch and break periods with their child and make sure they are suitable. |
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