

**Work Experience Placement Checklist – to be completed by the Employer**

Please complete and return to Penny Hudson, Hurworth School, Croft Road, Darlington. DL2 2JG or email to [phn@hurworth.swiftacademies.org.uk](mailto:phn@hurworth.swiftacademies.org.uk)

An electronic version of this form can be obtained on request from the email address above.

|  |  |
| --- | --- |
| **Employer details** | |
| Name of employer |  |
| Address |  |
| Contact Name |  |
| Contact Tel Number |  |
| Contact email address |  |
| Nature of business |  |
| Name of pupil undertaking placement |  |

|  |  |
| --- | --- |
| **Employers Liability Insurance Details** | |
| Insurers Name |  |
| Expiry Date |  |
| Policy Number |  |
| **Public Liability Insurance Details: If held** | |
| Insurers Name |  |
| Expiry Date |  |
| Policy Number |  |

|  |  |  |
| --- | --- | --- |
| **For school use only**  Date recd | Date processed | Checks made |

|  |  |
| --- | --- |
| Information to be shared with pupil before starting their placement | |
| Area of work |  |
| Who should the pupil report to on their first day? |  |
| Where should they go on their first day? |  |
| Does the pupil need to visit before starting their placement? |  |
| Dress code | * Smart * Casual * Old clothes * Uniform provided * Other (please give details) - |
| S H | Tuesday 7th May: |
| Wednesday 8th May: |
| Thursday 9th May: |
| Friday 10th May: |
| Lunch arrangements  Eg. Bring packed lunch, eat in staff canteen, buy lunch from local shops. |  |
| Safety equipment the pupil needs to bring eg. safety boots |  |
| What are the main duties the pupil will be undertaking? |  |
| Named person undertaking H & S Risk Assessment with student |  |

Name of person completing this form: …......................................................................

Position held:…..............................................................................................................

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