Dear Parent/ Carer,

 20 June 2019

**Year 12 Work Experience – 6th July – 10th July 2020**

As you may already be aware, Year 12 students are expected to undertake work experience for a week during the summer term. We are writing to give you more information on the support, expectations and procedures to ensure students have a safe, meaningful and positive placement.

We launched Work Experience to students with an assembly providing them with numerous resources and websites to support them. In this assembly we have covered Safety in the Workplace and Equal Opportunities so students are fully prepared.

Work experience expectations;

* Students are expected to look for a relevant placement that will enhance their future university, apprenticeship or job applications.
* Once a student secures a placement, they will need to ask the employer to complete a ‘Work Experience Placement Form’ which will be in the back of the student booklet and return this to Mrs McMillan room 902.
* All consent forms need to be returned by **31st October 2019**
* The deadline for securing a placement and have the required paperwork from the employer handed in is **28th February 2020**

We highly recommend all year 12 students organise and take part in this work experience opportunity. Any student who does not make arrangements will need to attend school as normal where an education plan of action will be put in place to assist them with future options and independent study.

Please complete the attached consent form and return to Mrs McMillan in room 902.

Support from the Careers team is available to students. Parents are welcome to attend appointments if they wish. To request an appointment please email swa-careers@bestacademies.org.uk

If you have any questions or concerns or would like further information please contact me on 01462629900 or email rjackman@bestacademies.org.uk

Yours sincerely,

Miss E Foreman Mrs J McMillan Mrs R Jackman

**Careers Leader Careers Administrator Work Experience Coordinator**

**WORK EXPERIENCE CONSENT FORM**

**Student:**

**Form:**

Please complete and sign all sections on this form and return to Mrs McMillan in room 902..

All contact details and medical information must be completed and please ensure there are **2** contacts listed for emergencies.

Should there be any further amendments required between submitting this form and the start of the placement, it is the parents’ responsibility to inform the Academy and ensure all details are fully up to date.

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| **Parent/Carer Details:** | **Contact Details** |
| **Name:** **Relationship to young person:**  | **Address:**  **Home Tel:** **Work Tel:** **Mobile:** **Email:**  |
| **Alternative Emergency Contact Name/Relationship** | **Contact Details** |
| **Name:** **Relationship to young person:**  | **Address:**  **Home Tel:** **Work Tel:** **Mobile:** **Email:** |
| **Details of any Current Medical Conditions/Allergies:** **Do any of these require treatment or medication: Yes No****If yes, please give full details:** |
| **Details of any Special Dietary Requirements or Food Allergies (e.g vegetarian, allergic to nuts etc):**  |
| **Has your child been immunised for Tetanus? Yes No**  |
| **Medical Practice & Address:** |  |
| **Telephone No:** |  |
| **GP Name:** |  |

Please let us know if any of the information above is incorrect and/or if it changes.

**WORK EXPERIENCE CONSENT FORM**

**Parent/Carer:**

 It is a condition of work experience that students do not receive payment and will therefore not be entitled to the industrial injuries benefit of the Social Security Act 1975 in the event of an accident while taking part in work experience. Particular care is taken to ensure that where students are faced with significant risks appropriate control measures are in place. Employers participating are asked to confirm that they have insurance which covers a student on work experience and that their health and safety provision is appropriate. For work experience requirements

**Parent / Carer**

I give permission for the school to share appropriate data with the employer. I understand that should any serious concerns occur during the period of work experience these should be brought to the attention of the school.

I confirm I have read and understood this information and agree to him/her taking part in the work experience.

Parent/Carer Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Student:** I agree to take part in this work experience. I agree to treat as confidential any information about the employer’s business which I may obtain during the work experience. I will not disclose such information to another person without the employer’s permission. I agree to comply with all safety, security and other regulations made known to me by the employer. I understand that I am required to take reasonable care for the health, safety and welfare of myself and others whilst I am on work experience.

Student Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_

**Use of Images:** Images may be taken of the students during the period of work experience. These images may be used in our school prospectus or in other printed publications that we produce, as well as in displays around school, in newsletters and on our website. The images may sometimes be used on our social media posts, using websites such as Twitter and Facebook. To comply with General Data Protection Regulations, we need your permission before we can photograph any student. Please circle the appropriate answer on all questions below and sign and date the form.

* May we use your child’s image on internal displays including display boards and electronic screens around the school? **Yes No**
* May we use your child’s image in the school prospectus and other printed material that may be used for promotional purposes, including school newsletters?

**Yes No**

* May we use your child’s image on the Bedford Academy website?

 **Yes No**

* May we use your child’s image on our social media accounts on Twitter and Facebook?

**Yes No**

**Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Please note that the personal details supplied on this form will be held electronically and on hard copy by BEST Academies Trust for education purposes and will be processed under the legal basis of public interest. The information may be disclosed to and held by the Local Authority and the DfE (Department for Education). Information on any medical or special educational needs may also be disclosed to the employer where it is deemed necessary. Full details of how and why this personal data is processed and shared with others is detailed within BEST Academies Trust’s Privacy Statement, accessed via the Samuel Whitbread Academy website (www.samuelwhitbread.org.uk)

 Work Experience Data Checking