



#### **PURPOSE OF WORK EXPERIENCE**

- insight into what a job involves
- structured, supervised, hands-on experience
- useful work skills that are recognised in the workplace
- work/life skills, such as communicating effectively, or working in teams



- experiencing a new environment, people and challenges
- an opportunity to demonstrate commitment and reliability
- a new referee to add to their resume
- an potential employment opportunity

• Learn from working in unfamiliar environments - the work experience provider/business owner cannot be a parent or relative of the participating student.



#### **ASK YOURSELF...**

- what do you want to get out of the placement?
- what activities can you legally and safely do as a student?
- what job or industry do you want to experience?



- which businesses in your local area you could approach
- what transport is available to get you to and from work
- what work days and hours are available for you to work – you will need to negotiate this

## INITIAL WORK EXPERIENCE DOCUMENTS

## You will receive FOUR documents:

- 1. Application form
- 2. Parent and students introduction letter
- 3. Provider introduction letter
- 4. Workplace health and safety short course



#### Work experience placements for school students Application

STUDENT DETAILS					YEAR / ROLL	
Student Name:					Date of Birth:	1 1
Phones			Email:			
Address:						
mergency Contact:			Emergency Phone:			
	edical conditions that r ch details of medication			8		
TUDENT EMPLOY	MENT / JOB STAT	rus				
o support your applic	ation, please answer t	he following:				
I. Have you ever had	a job? If yes, provide d	letalis.				
What tasks did you	perform at work? E.g.	cash register				
What WHS (safety)	was provided at your	wark?				
TUDENT LEARNIN	NG GOAL					
o support your appli	cation, please answe	r the following:				
What do you hope	to get out of this work	experience?				
How is this mapper	d to your career pathw	ay?				
What experience o	r skills do you have in t	his occupation?				
4. What safety training	ng have you undertaker	7 E.g. white card				
WORKPLACE PRO	VIDER DETAILS					
Provider's Name:						
Provider's Address:						
Naminated Supervisor	4		Contact Person:			
Phone:			Email:			
PLACEMENT DETA	ILS	_				
ndustry/Occupation:						
Days of placements			Dates of placemer	it:		
otal number of work	days:	Start work time:			Finish work time:	
https://www.business.c	or worsplace health and ald gov.au/stome or http documents for your busing eas plan   CO	s://www.basiness.gld				
Proposed workpface Consider requirements of students and excluded a assessment documentat	of the Work Health and S activities listed in the ins	Safety Act 2011 (Clid), urance information. P	Child Employment Ac lease provide relevan			
Please list a summary	of key workplace ac	tivities the student	may perform		A STATE OF THE PARTY OF THE PAR	e) Rith assessment.
	, answer phone calls,				Telephon Workplico Modern o	

- take your documents home and review them with your parent
- think about which businesses you will approach
- how will you approach them?
- fill out the student information sections on the application (see the following slide)

#### Work experience placements for school students

#### **Application**

**FRONT OF FORM** 

STUDENT DETAILS		YEAR / ROLL		
Student Name:		Date of Birth:	1	1
Phone:	Email:			
Address:				
Emergency Contact:	Emergency Phone:			
	dical conditions that may impact the student's work experience details of medications and health plans where relevant.)			

List medical conditions that may impact your placement.

e.g. Asthma

#### **TELEPHONE OR FACE TO FACE**

telephone approach—

suitable for tradespersons who

are mobile operators and work

in various locations

e.g. electrician



- face to face approach workplaces
   who have a physical store/office
   e.g. law firm, retail shop
- hospitals and teaching express your interest to the Pathways
   Officer in D09.



## Phoning first to make an appointment

Hello, my name is ....... and I am a student from Bundaberg State High School. Could I speak to the business owner about work experience?

#### THE OWNER COMES ON THE LINE.

Hello, my name is ..... and I was wondering if it was possible to make an appointment to come and speak to you about the possibility of doing work experience with your organisation?



#### **FIRST IMPRESSIONS**

- the business wants to meet you not your family or friends
- approach the workplace staff by yourself
- consider how you present yourself your image and attitude e.g. hat off, phone out of sight and a pleasant smile

#### PERSONAL PRESENTATION

Clothes – clean, ironed & appropriate

neat and clean hair

deodorant and perfume (not overpowering)

brush your teeth

clean and trim your finger nails

footwear to be clean and in good condition





positive body language – smile, make eye contact, stand straight, remove earbuds, turn off your mobile phone and put it out of sight.

voice tone – friendly, clear and confident

manners – introduce yourself, using the words
 'please', 'thank you'

 school expectations – ensure you comply with the school uniform policy e.g. jewellery – no facial piercing, keep earrings to a minimum,
 make-up to be natural looking



#### **WHAT TO SAY**

"Hello, my name is John Smith.

I am a student from Bundaberg State High School.

Could I please speak to the manager or owner

about a work experience opportunity with your

business?"

**Practice in front of a mirror** 

#### WHEN A BUSINESS SAYS 'YES'

- give the business the 'Provider Introduction' letter
- have a conversation with the provider and discuss the details of the work experience. This information is what you will use to complete the Application form



#### WHEN A BUSINESS SAYS 'YES'

- YOU must complete the Application form
- <u>DO NOT</u> give the form to the employer for them to complete it
- complete the sections 'Workplace Provider Details' and 'Placement Details' (see following slide)



	1 F I A II S			
WORKPLACE PROVIDER	ETAILS			
Provider's Name:				
Provider's Address:				
Nominated Supervisor:		Contact Person:		
Phone:		Email:		
PLACEMENT DETAILS				
Industry/Occupation:				
Days of placement:		Dates of placement:		
Total number of work days:  COVID-19  Current requirements for workpl	Start work time: ace health and safety (WHS) plans a home or https://www.business.ql	The state of the s		
Total number of work days:  COVID-19  Current requirements for workpl https://www.business.qld.gov.au Please attach relevant document COVID SAFE business plan  Proposed workplace activitie Consider requirements of the Wo students and excluded activities leadings.	ce health and safety (WHS) plans a home or https://www.business.qluster for your business.e.g.  COVID SAFE Checklist  and health and safety/risk assork Health and Safety Act 2011 (Qld) sted in the insurance information.	essments.  Child Employment Act 200	r high risk industries can be covid-19-restrictions/easin	g vork experience
COVID-19 Current requirements for workpl https://www.business.qld.gov.au Please attach relevant document COVID SAFE business plan  Proposed workplace activitie Consider requirements of the Wo students and excluded activities lassessment documentation to su	ce health and safety (WHS) plans a home or https://www.business.qlasfor your husiness e.g.  COVID SAFE Checklist  and health and safety/risk ass k Health and Safety Act 2011 (Qld)	essments.  Child Employment Act 200 Please provide relevant cop	r high risk industries can be covid-19-restrictions/easing the covid-19-restrictions/easing the covid-19-restrictions/easing the covid the workplace provides of the workplace provides the covid th	g vork experience

**FRONT OF FORM** 

#### Ask questions like:

**WORKPLACE PROVIDER DETAILS** 

- Who will be my supervisor?
- Who is the contact
   person for the school to
   communicate with?
- What is the best contact phone number?
- What is the best contact email address?

Provider's Name:							
Provider's Address:							
Nominated Supervisor:			Contact Porson:				
Phone:			Email:				
PLACEMENT DETAILS							
Industry/Occupation:							
Days of placement:			Dates of placement:				
				Finish work time:			
COVID-19 Current requirements for work, https://www.business.qld.gov.a	u/home or http its for your husi	s://www.business.qld ness.e.g.	The state of the s	for high risk indu	stries can b		
COVID-19 Current requirements for work, lettps://www.business.qld.gov.aplease.ettach relevant document COVID SARE business plan Proposed workplace activities consider requirements of the Westudents and excluded activities	u/home or http  tts for your busing  Co  es and hearth and sork Health and solutions	safety (WHS) plans ar s://www.business.qld ness.e.g. IVID SAFE Checklist and safety/risk asse Safety Act 2011 (Qld), urance information. P	.gov.au/running-busines .saments. Child Employment Act 2 lease provide relevant co	for high risk indu s/covid-19-restri	stries can b ctions/easi suitable for	work exper	_
Please attach relevant documer	es and hearth ork Health and Sisted in the insupport proposed	safety (WHS) plans ar s://www.business.qld ness.e.g. DVID SAFE Checklist and safety/risk asses Safety Act 2011 (Qld), urance information. P	gov.au/running-busines	for high risk indu s/covid-19-restri	stries can b ctions/easi suitable for place provi	work exper	enc

**FRONT OF FORM** 

#### **PLACEMENT DETAILS**

- Industry e.g. Retail
- What days of the weekwill I come to work?
- Confirm the dates you will work
- What time will I start and finish work each day?

WORKPLACE PROVIDER DETA	ILS			
Provider's Name:				
Provider's Address:				
Nominated Supervisor:		Contact Person.		
Phone:		Email:		
PLACEMENT DETAILS				
Industry/Occupation:				
Days of placement:		Dates of placement:		
Total number of work days:	Start work time:		Finish work time:	
Proposed workplace activities and Consider requirements of the Work Hea students and excluded activities listed in	alth and Safety Act 2011 (Qld),	Child Employment Act 200		A STATE OF THE PARTY OF THE PAR
assessment documentation to support		AND REAL PROPERTY OF THE PARTY		Risk assessment
Please list a summary of key workp (a.g. customer service, answer phor		may perform	Telephone c Workplace v Student indu School-deve	all
Please list the special requirements	s for placement (e.g. unifor	m, personal protective of		related document.

**FRONT OF FORM** 

- Write the total number of days you will work
- Does the business have any risk assessments?
- What tasks will I be doing? e.g. cleaning, observations, filing, stocktake,
- What do I need to bring or wear ?

# ACTIVITIES EXCLUDED FROM WORK EXPERIENCE



- driving of any watercraft exceeding 8 metres in length
- the repair, service, refuelling, maintenance, possession, operation, use or legal control of any aircraft by the Insured Agency, except for the participation in repair, service, maintenance by work experience students of the Insured Agency, who must be under the direct supervision of a Licensed Aircraft Maintenance Engineer or Australian Defence Force equivalent at all times

underground mining

abseiling



 oil and/or gas fields and oil and/or gas refineries; except for the participation by work experience and/or vocational placement students of the Insured Agency at Coal Seam Gas (CSG) industry and Liquefied Natural Gas (LNG) industry workplace sites where those work experience and/or vocational placement students must be under the direct supervision of a qualified and experienced CSG or LNG industry employee at all times

• the driving of any vehicle on a public road or thoroughfare or any airport runway or tarmac



 activities associated with railway track laying, track upgrading or track maintenance  construction or maintenance of railway locomotives or railway stock, except for the participation by work experience students of the Insured Agency at Queensland Rail workshops and Rollingstock Maintenance Depots, Aurizon workshops or Downer EDI Rail workshops where those work experience students must be under the direct supervision of a qualified and experienced Queensland Rail, Aurizon or Downer EDI Rail employee at all times

 rock and/or mountain climbing (with the exception of indoor rock wall climbing under the direct supervision of a qualified and experienced person at all times as per the minimum qualifications for supervisors outlined in the Curriculum Activity Risk Assessment (CARA) activity guidelines for Climbing (artificial or rock) and Abseiling)

white water rafting and canoeing



- bungee jumping and its associated activities
- underwater diving using either scuba or snorkelling equipment, where the student is not participating in an activity fully supervised by an appropriately qualified instructor.
- the use, handling and storage of firearms and explosive devices

PARENT/G	UARDIAN DETAIL	AND CONSENT					
Parent/Guard	dian Name:						
Relationship	to student:						
Emergency p	hone:						
A workplace of environments personal infor	an have various 'risks' th their child will engage in mation, and industry he	that may impact work nat a school may not, so it is n at work experience and the alth concerns. ormation to disclose?	s essential that pa ne potential risks	that environme		ased on th	neir child's
Additional Information:	I have updated my! I understand this is I understand there attending work exp I understand work to students, parent.	experience provider/busine student's medical file at sch an application and a risk as: may be additional requirem erience experience will not commer s/guardians and workplace nal work experience resource	ool sessment and ap ents and docume nce until an Agree providers	proval process ventation that m	will be undertal ust be complet signed by all p	ken by the ted prior to parties and	e school to my student d copies provided
Parent/Guar	dian signature: X			Date	e:	T	1

Parent/guardian completes this section

- All relevant
   information that may
   impact work
   experience is to be
   disclosed
- Read additional information
- Sign & date

**BACK OF FORM** 

#### **DISCLOSURE**

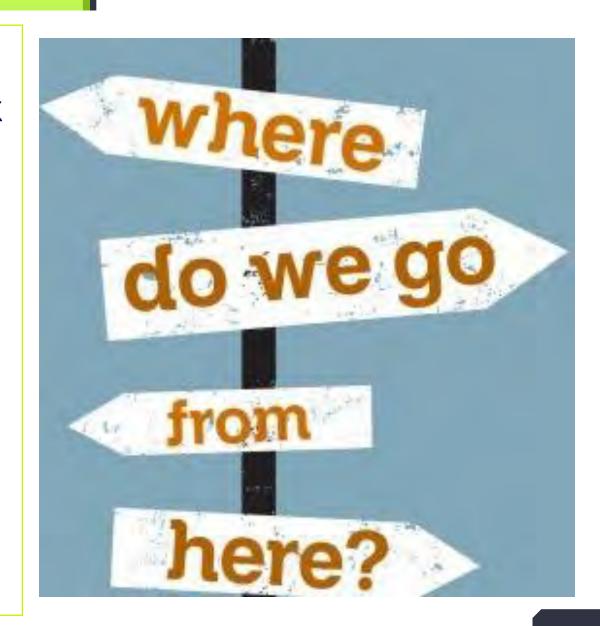
Under the Education (General Provisions) Act 2006 (Qld), the sharing of information by the student and/or the parent/guardian (if the student is under 18 years of age) is required, if it is necessary in averting a serious risk to the life, health or safety of the student or the safety of others. The school will not provide this information to any other person or agency unless the student and/or parent have given the school permission or the Department of Education is required by law to do so.

### STUDENT ACKNOWLEDGEMENT I have completed the Orientation to work experience student induction I have completed the Workplace health and safety short course requirements and attached the certificate I have completed COVID-19 Infection Control training requirements and attached the certificate I have attached a copy of the workplace providers COVID SAFE business plan if applicable I have attached a copy of the workplace providers COVID SAFE Checklist if applicable Student signature: Date:

# **YOU** read and action this section:

- Tick the boxes
- Sign & date the form
- Attach
   evidence of
   meeting WHS
   & COVID 19
   requirements

- thank the business for giving you the opportunity to do work experience with them
- give them your phone number and school email address so you can keep in contact with each other
- inform the business that you will submit your application to the school for processing



### \* tell the business the school will telephone them to:

- o discuss the placement
- o conduct a risk assessment
- discuss further documentation requirements,
   e.g. Agreement to be signed

- conclude with a positive closing statement, e.g.
  - "I am looking forward to this opportunity and
    - I will be in touch with you soon"

# YOU NOW NEED TO MEET YOUR WORKPLACE HEALTH AND SAFETY OBLIGATIONS



#### Work experience placements for school students

#### Workplace health and safety short course

it is mandatory for all students participating in work experience to understand their obligations relating to workplace health and safety (WHS) prior to commencing work experience.

Students must achieve qualifictions in both COViD19 training and WHS training and provide evidence of successfully completing these courses that are relevant to their intended work experience placement industry.

#### COVID-19 training

#### Complete COVID-19 training requirements

Step 1. Visit https://www.health.gov.au/resources/apps-and-tools/cond-05-infection-control-training

Step Z. Register by clicking on the Register new button

Step 3. Follow the prompts to complete the training

Step 4. Print the certificate



#### Workplace Health & Safety training

Choose one option below to meet your WHS training requirements

#### Option 1. WorkSafe SmartMove online WH&S training

WorkSafe SmartMove provides knowledge of WHS to enable you to recognise potential dangers, hazards and risks in the workplace and provides you with the tools to stay safe at work.



Complete the General Module and at least one industry Module to achieve your SmartMove Certificate.

- Step I. Go to https://smartmove.saletyline.wa.gov.au/
- Step 2. Select Login/Register and follow the prompts
- Step 3. General Module Click on the Enter button and follow the prompts
- Step 4. Industry Module Click on the module that matches your work experience placement and follow the prompts.
- Step 5. Print your certificate

#### Option 2. Statement of Attainment

If you have completed WHS training relevant to your work experience placement, you can provide a copy of your Statement of Attainment for WHS competencies completed. Provide a copy.



#### Option 3. Construction White Card

Required for work experience in Construction, Plumbing, Electrical or occupations where you will be entering an operational construction zone. Provide a copy,



Attach certificates and evidence of your WHS & COVID-19 training

to your work experience application

## WORKPLACE HEALTH AND SAFETY SHORT COURSE

# This must be completed before your application is processed

access the course information at

https://bundabergshs.eq.edu.au/curriculu

m/subjects-and-programs/work-

experience-program



#### **DOCUMENTS TO RETURN**

- Application Form fully completed
- Workplace Heath and Safety Short Course certificate requirements
- COVID19 Certificate
- Evidence you have completed the Work Experience Orientation program (printed declaration)

# **RISK ASSESSMENT**

## The school conducts risk assessments on:

- the student e.g. medical, behaviour, adjustments required
- the activity e.g. the tasks the student will be doing
- the Provider e.g. awareness of responsibilities relating to work placements, health and safety under the Work Health and Safety Act 2011 (Qld), and supervision of students

# All work placements are subject to Principal approval.

Where risks cannot be managed safely, alternative placements may be recommended.

- Time is needed to process applications.
- Some work places may require a site visit to be conducted by a suitability qualified person
- Check your email to see if further action is required to support the processing of your application
- A Work Experience Pack will be made available to you when all application processes have been satisfied

#### **WORK EXPERIENCE PACK**

- Agreement obtain signatures confirming agreement of each party's responsibilities. The student, parent and the provider is to sign
- Confirmation Letter give to the provider
- Student Evidence Handbook student completes induction checklist on the first day and emails to principal@eq.edu.au

student to complete during placement and obtain relevant signatures



# Contact the provider and say:

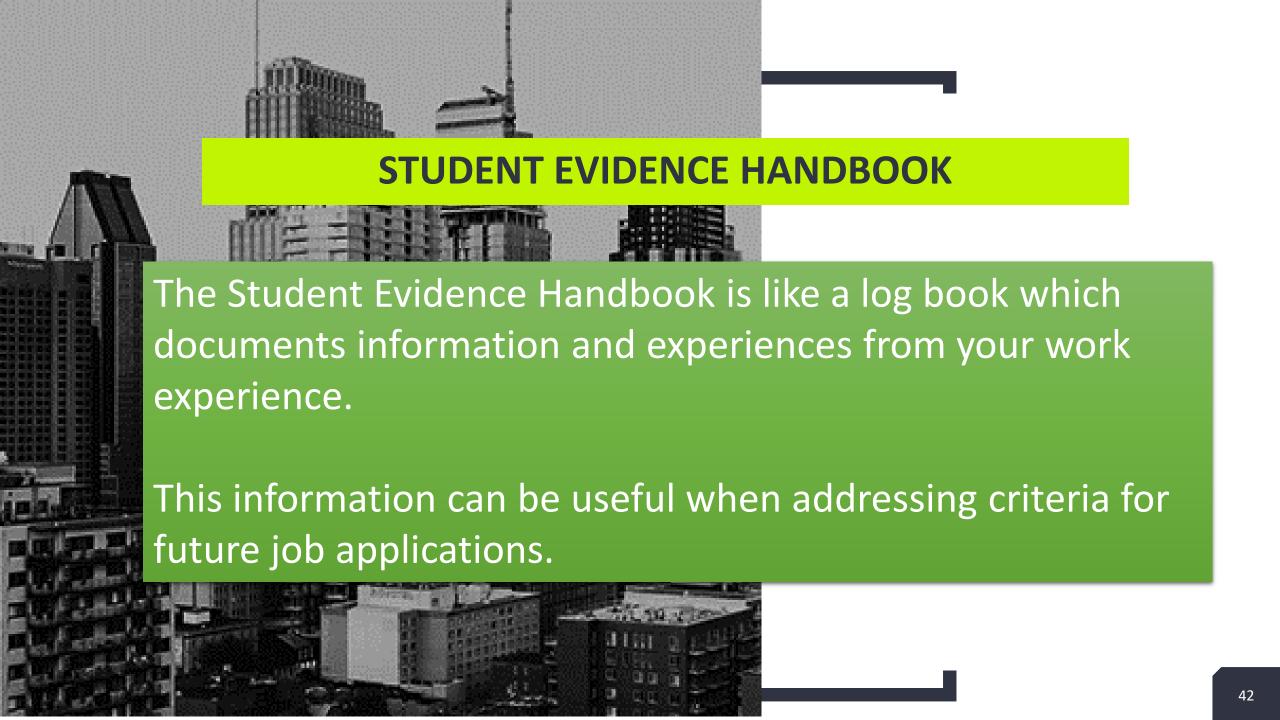
"Could I make an appointment to see you? I need to finalise my work experience placement and get my agreement signed"



#### **WORK EXPERIENCE PACK**

Student to return the fully signed Agreement and WHS & COVID19 Certificates to your Program Coordinator or Pathways Officer (as instructed)

Principal endorsed Agreements are emailed to employers, parents and students. No placements can proceed without receipt of the endorsed agreement by all parties



### STUDENT EVIDENCE HANDBOOK

• Induction checklist must be completed before commencing placement (provider also has a copy). A copy of the completed induction form is to be emailed to

Principal@bundabergshs@eq.edu.au on the first day of placement

 Reflection and feedback sections to be completed by the student and the provider at the end of the placement and returned to the school for review

## WHAT IS EXPECTED OF YOU AT WORK?

### **ATTENDANCE**

- arrive 10 minutes before your start time
- attend for the agreed hours as stated on your Agreement
- if you are going to be late phone your employer immediately, apologise, provide a reason and let them know you will be arriving soon

## WHAT IS EXPECTED OF YOU AT WORK?

# **ATTENDANCE**

Sick and unable to go to work?

- > YOU MUST phone your employer and let them know
- PARENTS MUST notify the school on the day of any absence



# **BEHAVIOUR**

- your behaviour at work should reflect the school's Responsible Behaviour Plan
- put away mobile phones and ear buds
- while some tasks may seem boring or repetitive, it is important to accept all tasks willingly and perform them to the best of your ability



## **BEHAVIOUR**

- listen to and follow instructions
- be polite, courteous and wellmannered throughout the placement with all staff members, customers and members of the public
- dress appropriately to industry standards in the work place



# **EFFORT**

- show enthusiasm and initiative
- complete duties as planned by the workplace supervisor to the best of your ability
- ask questions when you are unsure!! It shows you are interested in their business and prevents mistakes and accidents as a result of poor communication

# **EFFORT**

- ask for jobs when you have nothing to do – show that you want to keep busy!
- actively observe tasks like an apprentice or junior would do when at work
- you can learn a lot about a job by just watching people and their interactions



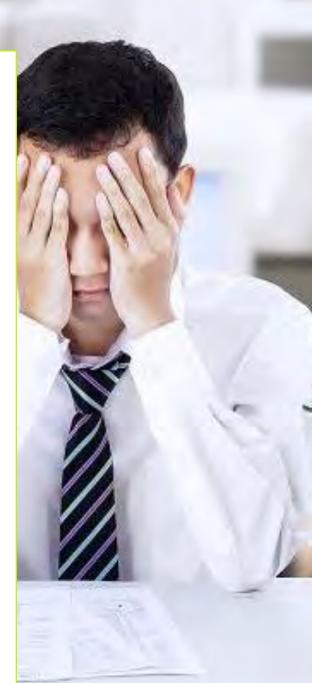
## **WORKING SAFELY**

INDUCTION CHECKLIST to be emailed to Principal@bundabergshs@eq.edu.au on the first day of work

- follow all workplace health and safety procedures in the workplace as outlined in induction and any other relevant training undertaken
- report to the school and provider any issues, concerns, incidents or accidents in the workplace you are involved in



- report to the Pathways Officer any harassment and unlawful discrimination you are involved in, and:
  - ➤ tell the offending person immediately not to behave in that way
  - inform your supervisor and parent
- comply with all reasonable directions given by the workplace supervisor
- participate in relevant and appropriate training, where required



 have a clear understanding of the work being carried out in your workplace

 use personal protective equipment (PPE) according to standard operating procedures

 if your feel that additional PPE is required, consult with your supervisor



 work under direct supervision at all times while undertaking workrelated activities

 report hazards to your supervisor immediately



# CONFIDENTIALITY

- you may be exposed to information about the business and/or clients that will be confidential
- you will be expected to maintain privacy by not repeating any of this information
- in some cases employers may want you to sign a confidentiality agreement
- find out from your work place supervisor what is considered confidential



## **WORKPLACE VISITS**

 students to remind the provider that a school representative will visit or call the business to obtain feedback from the workplace supervisor and the student

## **POTENTIAL OPPORTUNITIES**

- students should:
  - build positive relationships with the business and staff
  - ➤ ask if there are any opportunities e.g. school based apprenticeships, traineeships or employment

# WHAT IS EXPECTED OF PROVIDERS?

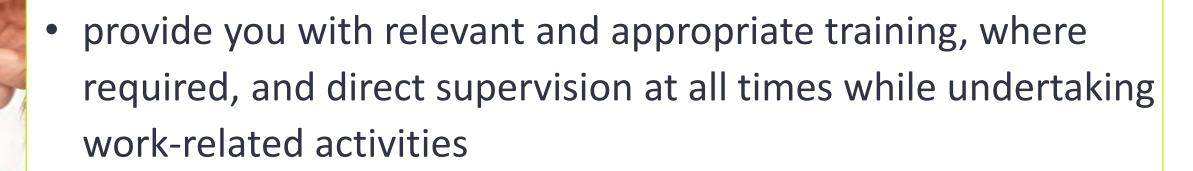


- provide you with a safe working environment by understanding their responsibilities under the Work Health and Safety Act 2011 (Qld)
- provide the school with a summary of the main activitie the student will undertake whilst on work experience ar details of special requirements for placement, eg. PPE
- explain work tasks clearly and implement reasonable adjustments where appropriate for students with additional educational needs

- understand the level of liability and excluded activities to ensure the student will not undertake activities which are prohibited by law, excluded under the department's liability cover, or unsuitable for a student placed in work experience environment
- ensure the hours worked do not exceed the normal hours worked in the industry
- complete and return all required school documentation and return the Induction Checklist to <a href="mailto:Principal@bundabergshs@eq.edu.au">Principal@bundabergshs@eq.edu.au</a> on the first day of work
- ensure the supervisor has the contact details of the Pathways Officer in case an issue arises



- explaining workplace policies regarding bullying, harassment and discrimination and any other codes of conduct relevant to the workplace
- explaining the tasks you will undertake during the placement
- explaining processes for reporting problems or issues to your workplace supervisor and immediately contacting the Pathways Officer



- meet with school staff who visit the workplace to discuss the student's progress
- ensure the student is not paid whilst undertaking work experience

- inform students of particular WHS requirements of the workplace including personal protective clothing and equipment
- ensure the permitted number of students accepted for work experience does not exceed the number of full time employees
- provide support for you in the work place and encourage you to participate in a range of activities which do not require extensive training or expertise
- allocate a workplace supervisor to you and ensure this person is aware of their responsibilities during the placement

- contact the school to notify of any absence
- notify the school immediately of any incident or accident involving you, any action undertaken and damages to property involving you during the placement
- make sure you receive adequate breaks throughout the day
- understand that the arrangement may be terminated at any time by the school principal or provider

## WHAT IS EXPECTED OF THE PARENT?



- sign the Agreement and return it to the school to confirm their agreement and acknowledge their responsibilities relating to the placement of their student
- provide any information about medical conditions and/or medication relating to the student for inclusion on the work experience agreement which may impact on the safety of the student or the safety of others in the workplace

#### WHAT IS EXPECTED OF THE PARENT?

- understand their responsibilities regarding transportation of their student to the work experience location and notifying the school and work experience provider if the student is unable to attend work experience
- understand they are responsible for all expenses related to their student's participation in the work experience placement.
- reporting their student's absence from work experience to the school as soon as possible on the day of absence

## **AFTER WORK EXPERIENCE**

- return your Student Evidence Handbook to the Pathways
   Officer in D09
- be available to participate in a debriefing about your placement
- review and revise your SET Plan to determine if your post school pathway and career goals remain the same
- refer to your school email to access and complete a survey about your work experience placement

Print and fill out this page and submit this with your work experience application form.

# **DECLARATION**

I, (first and last name)	declare that I have read and
understood the <b>Orientation to Work Experience</b> and I will do what is required of me to participate in the work	
experience program.	
Signature	Date