

**Work Experience Private Placement Agreement**

(To be completed by the employer)

I agree to provide a placement for \_\_\_\_\_ (name of student)

Tutor Group: 10\_\_\_

from **Monday 6<sup>th</sup> July – Friday 17<sup>th</sup> July 2020** inclusive

**Insurance Details: *without Employer Liability Insurance a placement cannot commence***

|                    | Insurance Company | Expiry Date | Policy Number |
|--------------------|-------------------|-------------|---------------|
| Employer Liability |                   |             |               |
| Public Liability   |                   |             |               |

Company Name : \_\_\_\_\_

Placement Address : \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Post Code : \_\_\_\_\_

Tel No : \_\_\_\_\_

Email : \_\_\_\_\_

Contact Name : \_\_\_\_\_

Position in Company : \_\_\_\_\_

Supervisor's Name (if different) : \_\_\_\_\_

**TYPE of WORK + possible Tasks** e.g. Office - Spreadsheets, Salon – tidying & greeting clients , Classroom – reading to children, Factory – work shadow + simple manual tasks, Land-based – physical tasks

**Working Hours**

Students are expected to work a **maximum** of 40 hours per week. They should not start work before 8am or finish later than 7pm.

Please complete the box below to inform the school and students of the hours they are required at the placement.

| Day       | Working Hours |    | Break/lunch |
|-----------|---------------|----|-------------|
|           | From          | To |             |
| Monday    |               |    | mins        |
| Tuesday   |               |    | mins        |
| Wednesday |               |    | mins        |
| Thursday  |               |    | mins        |
| Friday    |               |    | mins        |
| Saturday  |               |    | mins        |

Employer Signature : \_\_\_\_\_ Date : \_\_\_\_\_

Parent/Carer Signature : \_\_\_\_\_ Date : \_\_\_\_\_

We would like to thank you for agreeing to offer our student a placement for their Work Experience. It is such an important aspect of their education and will help them understand the skills and commitment required in the adult world of work.

If you have any queries please contact the Work Experience Team at West Coventry Academy and we will endeavour to answer your concerns.

West Coventry Academy Work Experience Team

|                      |                         |                         |
|----------------------|-------------------------|-------------------------|
| Mrs Chris Day        | Careers Advisor         | 02476426237/07717004337 |
| Ms Bev Hall          | Year 10 Pastoral Leader | 02476426219             |
| Mrs Charlotte Palmer | Year 10 Progress Leader | 02476426259             |