



Woking College Work Experience Placement Health and Safety Questionnaire and Declaration

Please ✓ as appropriate

	Yes	No
Do you have current Employers' Liability insurance that will cover students on Work Experience? Please <u>attach a copy of the certificate</u> for our records and give the Renewal Date of your policy _____		
Do you have current Public Liability insurance that will cover students on Work Experience?		
Do you have more than 5 employees?		
Do you have a written policy for Health, Safety and Welfare at work that has been reviewed in the last 3 years?		
Will the student be using dangerous machinery or processes? If yes, please give details.		
Have Risk Assessments been carried out in the areas where the student may be working?		
Do these assessments take into account the student's age and relative lack of experience and awareness of risk?		
Will the student be informed of the findings of these assessments during Induction?		
Do you provide any necessary protective equipment that the student requires for working?		
Do you have at least 1 qualified First-Aider?		
Do you have appropriate First Aid provision?		
Will the student be given an Induction to include emergency procedures e.g Fire, Accident and Injury?		
Are accidents at work recorded in an accident book and notified as necessary under RIDDOR?		
We would like any accident, however small, involving the student to be reported to Woking College. Do you agree to do this?		

Declaration

I confirm that the questions have been answered to the best of my knowledge and that this organisation accepts full responsibility for the health, safety and welfare of any Woking College student, as if they were employees, whilst on work experience with us.

Signature _____

Position in Company _____

(Please print name) _____

Date _____

PTO



Work Experience Information Sheet

Name of Student	
Date of Work Experience (from and to)	
Contact name at company/employer: (please state if you are a relative)	
Company/Employer name and address:	
Telephone number:	
Email address:	
Nature of the business:	
Please give details of the work to be undertaken during the placement:	Arrangements for first day: (when, where and to whom should the student report)
Name of person to act as Supervisor to student:	
Hours of work – please include start and end times:	
Lunch break:	
Meals and Break arrangements (if there is a canteen, approximate cost of a meal)	
Special Clothing (if required) and Dress Code:	
Travel Advice: (where relevant)	
Any special requirements or other comments:	