



My Rock and My Fortress

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**MASADA COLLEGE**

Early Learning Centre  
Kindergarten to Year 12

9-15 Link Road St Ives NSW 2075

PO Box 235 St Ives NSW 2075

Phone: (02) 9449 3744 Fax: (02) 9144 3722

Email: masada@masada.nsw.edu.au

www.masada.nsw.edu.au

# WORK EXPERIENCE PROGRAM 2017

## Letter of Introduction

Dear

This letter is to introduce \_\_\_\_\_ of Masada College, who is participating in our 2017 Work Experience Program.

Student E-mail address: \_\_\_\_\_ Student mobile phone: \_\_\_\_\_

The student comes to you with the approval of his/her parents and the College to seek an **unpaid placement** for the following dates

The student is seeking to achieve the following whilst on work experience:

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Work Experience is considered to be part of our total education program. It is intended to help students develop:

- **Self Knowledge and Understanding:** awareness of their abilities, interests and values and constraints and applying this understanding to make appropriate, realistic career decisions.
- **Self Management skills:** For students to take responsibility for themselves, have a personal vision and career goals. It is also about following through on their commitments and managing the activities in their life, both and school and extracurricular activities.
- **Career Management skills:** Learning how to proactively manage their own career and education. To be aware of what career opportunities exist and how to pursue them. To conduct themselves in a professional and appropriate way for the work context and exposure to the culture of a workplace.

### Child Protection Requirement

The placement form requires the supervisor of the student to sign a declaration related to Child Protection (detailed Attachment A). This declaration covers all individuals working with or in contact with the school student and employers need to ensure that all staff are aware of the special responsibilities associated with working with children in order to protect children from all forms of abuse, including sexual, physical, emotional abuse and neglect.

### Insurance Coverage

Students involved are insured through **AON Certificate of Currency Student Work Experience & Community; Activity Programs – Student Personal Accident APAS O4PO007734 and NSW Public Liability at1023390PLB**

### Host Employer Consent and Acknowledgement Form

Your participation in this program would be greatly appreciated. If you can assist by hosting this student, please complete the attached form [ATTACHMENT A] and return to the student, or directly to the school at the address above. Please contact me on 9449 3744 should you require more detailed information.

Yours faithfully,

**Christine Watson-Brown**  
Careers Adviser



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## [ATTACHMENT A]

### HOST EMPLOYER CONSENT AND ACKNOWLEDGMENT FORM

#### Supervision

1. Appropriately trained and experienced members of our staff will provide supervision and support to the student during the placement.
2. The Supervisor will contact the Work Experience Coordinator (Christine Watson-Brown 0408 887 480) if the student is late or fails to attend for work and should Christine not be contactable, phone the College on 9449 3744.

#### Work Health and Safety

3. My organisation understands its legal responsibilities under Work Health and Safety Act 2011 (<http://www.workcover.nsw.gov.au/newlegislation2012/Pages/default.aspx>):
  - As an employer for health and safety at our workplace(s), and will act in accordance with those responsibilities; and
  - Not to expose other people, to risks to their health and safety in our workplace(s).
4. My organisation complies with work, health and safety laws and any other relevant codes of conduct or practice of the state in which the placement is conducted.
5. My organisation understands that a student may lack any experience in the workplace and may be unaware of health and safety risks and my organisation will take appropriate measures to meet the specific WHS needs and requirements of students whilst they are in our workplace (s).
6. My organisation will provide the student with any information, instruction and training necessary to ensure the student's health and safety in our workplace(s), including an WHS induction on the student's first day in our workplace(s).
7. My organisation will provide a safe working environment and adequate facilities for the welfare of students at our workplace; in particular we have first aid facilities, fire wardens and emergency procedures for our workplace(s). The student will be advised of these facilities and procedures during the WHS induction on the student's first day in our workplace(s).
8. My organisation has identified hazards in our workplace(s) that could harm employees and students, assessed the risks of harm to employees and students of those hazards, and taken action to control and eliminate those hazards where possible.



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9. My organisation will familiarise ourselves with the student's identified special needs. We understand that the School will provide a record of such needs to my organisation prior to the placement.
10. The student will not undertake any activities requiring a licence. Permit or certificate of competence unless they have the relevant current licence, permit or certificate and the activity is directly related to outcomes of the placement.
11. My organisation will supervise and instruct the student on how to use, store and maintain equipment/machinery and hazardous substances and provide protective clothing to the student where necessary.
12. If we are considering taking the student onto a building/construction site or other high risk area, we will discuss this with the Work Experience Coordinator in advance.
13. Should the student accompany a member of our staff or other person in a motor vehicle as part of their placement tasks, the driver of the vehicle will hold a current registered, fully insured (compulsory third party and full comprehensive insurance) and roadworthy.
14. In the event that the student is injured or becomes ill at work, we will contact Masada College (and the student's parent/guardian) as soon as practicable after being notified of the injury or illness.

### Child Protection

15. My organisation is not aware of anything in the personal background of a member of staff or other person, who will have close unsupervised contact with the student during their work placement, that would legally preclude that member of staff or other person from working with children.
16. We will contact the Work Experience Coordinator immediately if: an allegation is made against a member of staff or other persons of child abuse or sexual misconduct against the student or we become aware of any ill treatment of the student, act of violence that occurred in the student's presence, act of violence toward the student or other occurrence that puts the student at risk.

### Anti-discrimination

17. My organisation complies with the anti-discrimination laws of the state in which the placement is conducted.
18. We understand the legal responsibilities of an employer for anti-discrimination at our workplace(s), and will act in accordance with those responsibilities.



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19. We will contact the College immediately if an allegation is made against a member of staff or other persons of discrimination against a student or an allegation is made of discrimination by a student.

### Changed Circumstances

20. If the circumstances of my organisation change prior to the student commencing the placement or during the placement, and we are no longer able to make the above acknowledgments, we will contact the Work Experience Coordinator to discuss the situation as soon as possible and, in the case of any change occurring prior to the student commencing the placement, before the student commences.

### Young workers

21. My organisation is aware young workers can lack the experience, knowledge and skills to identify and deal with potential hazards. Inexperience and a lack of awareness can increase the likelihood of a young worker being injured. Please consult Work Cover for more detail:  
<http://www.workcover.nsw.gov.au/health-and-safety/safety-topics-a-z/vulnerable-workers>



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**[ATTACHMENT A]  
HOST EMPLOYER CONSENT AND ACKNOWLEDGMENT FORM**

Supervisor's Name: \_\_\_\_\_ Position: \_\_\_\_\_

Host Organisation: \_\_\_\_\_

Host Address: \_\_\_\_\_

Host mobile: \_\_\_\_\_ Host e-mail address: \_\_\_\_\_

Signature: \_\_\_\_\_

Students Name: \_\_\_\_\_ Dates Attending: \_\_\_\_\_

Whilst on placement the student will be undertaking the following tasks (insert activities):

- 
- 
- 

**[ATTACHMENT B]  
PARENT CONSENT FORM**

I have:

- read 'Attachment C: INFORMATION FOR PARENTS AND STUDENTS', provided to me by the college.
- submitted to the Careers Adviser a completed and signed copy of 'ATTACHMENT A : HOST EMPLOYER CONSENT AND ACKNOWLEDGMENT FORM' (above)

I consent to my child participating in the Work Experience program outlined above:

Student's Name: \_\_\_\_\_ Student mobile number: \_\_\_\_\_

Parent Name: \_\_\_\_\_ Parent contact phone number: \_\_\_\_\_

Parent email address: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

**DUE BY FRIDAY 15<sup>th</sup> SEPTEMBER 2017**

Please return your completed form to Christine Watson-Brown, Careers Adviser via the college office, by email [cwatson-brown@staff.masada.nsw.edu.au](mailto:cwatson-brown@staff.masada.nsw.edu.au) or fax to 02 9144 3722