



WORK EXPERIENCE DATA AGREEMENT

Please return by 10 October 2016

STUDENT NAME _____

We require some specific information in order to provide and process a work experience placement. We are required to pass on some of this information to the placement provider so that they can provide a suitable experience and do everything reasonable to protect the health, welfare and safety of students. To enable us to process this placement, please read the form and sign below, agreeing to the data being used for the purposes listed.

The placement provider may need to know the following information:

Data processed	Use of the data (by work experience organiser and placement provider)	Reason for collecting data
Name & age of student	The student's age may affect the placements available or the activity they can do.	Legal and Health & Safety issues
Address	We use this information to locate a placement within travelling distance. The student may need to be taken home or in an emergency you may be contacted.	Organisational and Welfare issues
Home Telephone	Placement provider may need to contact you.	Welfare issues
Medical information	The placement provider will need to decide if the placement will be suitable or if there is some activity the student should not be involved with due to their condition.	Health Safety issues
Special Educational Needs	The placement provider will need to provide a suitable induction including Health & Safety info, e.g. what to do in case of fire, and suitable tasks for each student matching their individual capabilities	Health & Safety issues
Emotional & maturity issues	The placement provider will need to provide suitable levels of supervision and support for each student on placement to ensure that they do not put themselves or others in any danger.	Health & Safety issues
Gender	We use this information to find a suitable placement. We give the placement provider the information so that they can plan for the placement and make suitable supervision arrangements.	Organisational and Welfare issues

If there is any additional information you think would be relevant for us to know please could you provide it below (e.g. any involvement with the Youth Offending Team or Criminal Record)

I as parent/guardian agree to the data being used for the reasons stated

Title	Name	Signature
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Date: