CAREERS @ Nobel

Yr12 Work Experience – Information and Permissions Pack.

Raising Aspirations Raising Achievement

Dear Parent/Carer

In reference to the Year 12 Work Experience week from 15 – 19 June 2020, I would like to ask for your assistance in supporting your son/daughter with finding a placement.

Enclosed are a number of key documents:

1. A letter to employers (Form A)

2. A Work Experience check list (Form B) to help you keep track of the process!

3. Parental Consent Form (Form C) to be completed by yourselves and returned to your child's Form Tutor

4. Placement Agreement Form (Form D) to be completed by yourselves and the employer

5. A template letter to contact employers (Form E)

Please complete and return the enclosed Parental Consent Form (Form C) to your child's form tutor by **Friday 31 January 2020**.

Please complete and return the enclosed Placement agreement form (Form D) to your child's form tutor by **Friday 27 March 2020**.

Competition for placements this week are likely to be in huge demand. We are urging students to make contact and agree arrangements with an employer in plenty of time so that they are not disappointed, but also have relatively free choice of where they would like to attend.

Please contact me if you have any questions.

Yours sincerely

Bob Lovelock
Careers Leader at Nobel School

Dear Sir/Madam,

This letter has been passed to you by an employee who would like to offer one of our Year 12 (aged 16-17) students the opportunity to complete a week's work experience at your company. This obviously needs your approval and will require some level of planning. I would like to provide you with a little information about what it is and why we do it in order for you to reach a decision.

Quality work experience placements make an invaluable contribution to ensuring that students have a broad and balanced curriculum and moves students learning from the classroom into the world of work. It also provides and understanding of the expectations made of an employee, and their responsibilities whilst at work.

The student will:

- not require payment
- be a visitor for the week and be covered by your Public and Employers' Liability Insurance

Through work experience, our aim is for students to:

- appreciate what is involved in a week of work
- carry out straightforward and safe tasks under supervision
- form an appreciation of the different vocational areas within the world of work
- understand the needs of different businesses/organisations
- recognise how work in the classroom relates to developing skills for their future employment

Your involvement will enable work-related learning for this student to be both practical and relevant to the future demands of life at work and home. A close relationship with education can be a sound investment. Today's young people will shape your future in many ways – as employees, as customers/consumers and as citizens.

Your staff who participate in the work experience, such as by training or buddying up with them, develop a wide range of skills. For example, employees may improve their teaching and communications skills and may find more effective methods of working.

Work experience students can also bring a new range of insights with them to your business which may help your existing employees. You will also improve the students' knowledge and skills and provide them a real view of your industry or your company.

I do hope that you will be able to support us. Should you require any points clarified, please contact me directly. I look forward to your support with this work experience opportunity.

Yours sincerely

Bob Lovelock
Careers Leader at Nobel School

FORM A

WORK EXPERIENCE WEEK CHECK LIST

Please retain this document at home.

1	Identify a company that will accommodate your son / daughter for a week's work experience	
2	Contact the employer seeking permission for the placement (exemplar letter provided)	
3	Arrange a meeting with the employer in order to: - Pass on the letter from the school outlining the rationale behind the day - Check that the employer has the necessary Public Liability and Employers' Liability insurance - Inform the employer if your son / daughter has any medical or dietary needs that they may need to be aware of - Ask them to complete and sign the **Placement Agreement Form**	
4	Complete the **Parental Consent Form**, making sure you tick the appropriate statements	
5	Return the **Parental Consent Form t**o your child's Form tutor by Friday 31 January 2020	
	Return the **Placement Agreement Form t**o your child's Form tutor by Friday 27 March 2020	

FORM B

PARENTAL CONSENT FORM

Please return this document to school by Friday 31 January 2020.

NAME OF PARENT	
NAME OF CHILD	
CHILD'S DATE OF BIRTH	
CHILD'S FORM	

Please tick (·) as appropriate	**Yes**	**No**
I give my consent for my son / daughter named above to take part in the school's work experience programme		
I will take full responsibility for my son's / daughter's welfare on the day		
I understand that no payment in respect of work done may be made		
I know of no medical reason why my son / daughter should not take part in work experience		
If there are any medical considerations / special needs that may affect the type of placement which would be suitable, please indicate below:		

SIGNATURE OF PARENT **DATE**

FORM C

PLACEMENT AGREEMENT FORM

Please return this document to school before Friday 27 March 2020.

School Name	**The Nobel School, Mobbsbury Way, Stevenage, SG2 0HS**
School Contact Name	**Mr Bob Lovelock**
School Contact Number	**01438 222600**
Dates of Work experience	**Monday 15 to 19 June 2020**

TO BE COMPLETED BY PARENT / CARER			
Name of student			
Date of birth		Form group	
Name and address of work experience provider			
Name of supervisor		Position	
Contact number		Email address	

TO BE COMPLETED BY THE EMPLOYER			
Position of work experience			
Please detail the nature and type of work			
Employers' Insurance Checklist Please indicate that you hold the relevant up-to-date insurance cover by completing the section below. We must stress that only those employers with Public and Employers' Liability Insurance will be used for this work experience programme.			
EMPLOYER'S LIABILITY INSURANCE			
Company			
Policy number		Expiry date	
PUBLIC LIABILITY INSURANCE			
Company			
Policy number		Expiry date	
Signed		**Print Name**	
Position		**Date**	

FORM D

Your Full Address

Postcode

The Employer's name
Full Address
Postcode

Date

Dear *Person's name* or *Sir/Madam*,

I would like to enquire about the possibility of a work experience placement with your company between Monday 15 June and Friday 19 June 2020.

I am a student at The Nobel School, Stevenage and when the work experience starts I will be (*age*). I am studying (*list subjects and whether GCSE, BTEC, CTEC, OCR Nationals*)

I would like to work (*at your company / in your shop / in your school, you fill in what is appropriate for your placement*) because (*make it sound how interested you are*)

I have (*list any experience that you may have e.g. had a paper round for a year, babysit for friends/family, have a part time job in a local shop……)*

I am (*list some of your personal skills and qualities e.g. friendly, reliable, hardworking, enjoy meeting people etc*) My personal interests are (write *any down that may help with your application*)

I look forward to hearing from you

Yours sincerely (*if you're writing to a named person*) / Yours faithfully (*if you started Sir/Madam*)

(*Sign your letter*)

Print your name