**FJ07**



Work Experience Workbook

Young Person’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**Important Information**

|  |
| --- |
| **My work experience supervisor is** |
|  |
| **Their address and phone number are** |
|  |

|  |  |
| --- | --- |
| **I also work with:** |  |
| **The First Aid person is:** |  |
| **I report accidents to:** |  |
| **If there is a fire I must:** |  |
| **My nearest fire exit is:** |  |
| **The fire assembly point is:** |  |
| **Do I need protective clothing?** |  |
| **What equipment can I use?** |  |
| **What equipment can I NOT use?** |  |

**Policies and Procedures**

Policies are in place within your work experience employment to protect staff and the public. Information about these will be given to you during your workplace induction. It is important for you to familiarise yourself with how your employer operates and the procedures that you will need to follow.

You **MUST** read the following policies and procedures in order to protect yourself and others:

(Please tick when read)

|  |  |  |  |
| --- | --- | --- | --- |
|  | Health and Safety Policy (see page 3) |  | Accident/Incident Policy |
|  | Equal Opportunities Policy |  | Confidentiality Policy |
|  | Behaviour Policy |  | Mobile Phone Policy |

**Health and Safety**

On your first morning your supervisor has been asked to show you how to work safely so that you do not injure yourself or anyone else. Please complete the table below.

**Raising concerns**

If you are concerned about any issues within your work experience provider please speak to your workplace supervisor or the manager. These staff members can often provide support and guidance, ensuring that the correct procedures for raising concerns are implemented. If you do not feel confident to approach your workplace supervisor or the manager; please contact your Tutor. Wherever possible we work closely with work experience provider to resolve issues or concerns in a positive manner.

**Absence procedure**

If you are unable to attend work experience you mustinform your work experience provider **before 10am** and telephone your college tutor, failure to do so may result in disciplinary proceedings or in the loss of your work experience.

**Ten top tips for work experience**

1. **Attend** every day and always arrive in plenty of **time**
2. Treat everyone with **consideration** and be polite at all times
3. Be **enthusiastic** and show a **positive attitude** to your work
4. Wear **appropriate clothing**
5. **Listen** carefully to instructions and ask if you do not understand
6. **Think** before you act and **work safely**
7. If you have a **problem** with work talk to your **supervisor**
8. If you **can’t sort** out a problem at work ask your **tutor**
9. Keep a **record** of everything you do
10. Send a **thank you letter** to your employer

**Work Experience Five Day Diary**

|  |  |
| --- | --- |
| **Day 1** |  |
| **Date:** |  |
| **Duties Performed:** | |
|  | |
| **Skills Learnt / Used:** | |
|  | |
| **What went well and what could have gone better?** | |
|  | |

|  |  |
| --- | --- |
| **Day 2** |  |
| **Date:** |  |
| **Duties Performed:** | |
|  | |
| **Skills Learnt / Used:** | |
|  | |
| **What went well and what could have gone better?** | |
|  | |

|  |  |
| --- | --- |
| **Day 3** |  |
| **Date:** |  |
| **Duties Performed:** | |
|  | |
| **Skills Learnt / Used:** | |
|  | |
| **What went well and what could have gone better?** | |
|  | |

|  |  |
| --- | --- |
| **Day 4** |  |
| **Date:** |  |
| **Duties Performed:** | |
|  | |
| **Skills Learnt / Used:** | |
|  | |
| **What went well and what could have gone better?** | |
|  | |

|  |  |
| --- | --- |
| **Day 5** | |
| **Date:** |  |
| **Duties Performed:** | |
|  | |
| **Skills Learnt / Used:** | |
|  | |
| **What went well and what could have gone better?** | |
|  | |

|  |
| --- |
| **Student Review** |
| **What did you enjoy?** |
|  |
| **What did you find challenging?** |
|  |
| **What did you learn that will help you in your chosen career?** |
|  |
| **What else would you like to learn before you progress into your chosen career?** |
|  |

**Employer Feedback**

Please complete this page at the end of the work experience placement.

**Please score each area out of 4.**

1 = Unsatisfactory, 2 = Satisfactory, 3 = Good, 4 = Excellent.

\*Please add individual skills targets if / where required.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Employability Skills** | **1** | **2** | **3** | **4** | **Employability comments** |
| **Attendance and Timekeeping** |  |  |  |  |  |
| **Teamwork** |  |  |  |  |
| **Following Instructions** |  |  |  |  |
| **Communication skills** |  |  |  |  |
| **Initiative and motivation** |  |  |  |  |

|  |
| --- |
| **Any additional comments** |
|  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Days of attendance** | | | | | | | |
| **Start date** |  | | | **End date** |  | | |
| Insert times below for actual attendance | **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** | **Saturday** | **Sunday** |
| **Start time** |  |  |  |  |  |  |  |
| **Finish time** |  |  |  |  |  |  |  |

|  |  |
| --- | --- |
| **Declaration** | |
| I can confirm that the young person named above has completed the planned work experience as detailed in this workbook | |
| **Employer Name** |  |
| **Signed** |  |
| **Date** |  |