

**EMPLOYER TO COMPLETE:  
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:	

	YES	NO
<p>Please be aware of your safeguarding responsibilities. We are committed to ensuring all our students are working in a safe and secure environment. Please find a summary of our safeguarding principles attached. Please read this and tick the YES box to confirm you have done this.</p> <p>(If you would like to read the full version of the college's safeguarding policy, it can be found within the communications-policies-and-procedures section of our website <a href="http://www.reigate.ac.uk">www.reigate.ac.uk</a>)</p>		
<p>Do you have current Employers' Liability insurance that will cover students on Work Experience? Please attach a copy of the certificate for our records.</p>		
<p>Do you have current Public Liability insurance that will cover students on Work Experience?</p>		
<p>Do you have more than 5 employees?</p>		
<p>Do you have a written policy for Health, Safety and Welfare at work that has been reviewed in the last 3 years?</p>		
<p>Will the student be using dangerous machinery or processes? If yes, please give details.</p>		
<p>Have Risk Assessments been carried out in the areas where the student may be working?</p>		
<p>Do these assessments take into account the student's age and relative lack of experience and awareness of risk?</p>		
<p>Will the student be informed of the findings of these assessments during Induction?</p>		
<p>Do you provide any necessary protective equipment that the student requires for working?</p>		
<p>Do you have at least 1 qualified First-Aider?</p>		
<p>Do you have appropriate First Aid provision?</p>		
<p>Will the student be given an Induction to include emergency procedures e.g. Fire, Accident and Injury?</p>		
<p>Are accidents at work recorded in an accident book and notified as necessary under RIDDOR?</p>		
<p>We would like any accident, however small, involving the student to be reported to Reigate College. Do you agree to do this?</p>		

### 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 Reigate college student, as if they were employees, whilst on work experience with us.**

Signature \_\_\_\_\_

Position in Company \_\_\_\_\_

Print name \_\_\_\_\_

Date \_\_\_\_\_

Please return the completed form to either [workexperience@reigate.ac.uk](mailto:workexperience@reigate.ac.uk) or Work Experience Department, Reigate College, Castlefield Road, Reigate, Surrey, RH2 0SD.