

WORK EXPERIENCE CONSENT FORM

Henley-in-Arden School

'Achieving Excellence Together'

Email: admin@henleyschool.com Tel: 01564 792364



To be returned to Mrs D Reynolds in the Pastoral Office

Print name of student: _____

Form: _____

Student Consent

I agree to take full part in my work experience. I will not pass on any information about the business to another person without the Employer's permission. I also agree to observe all safety, security and other rules explained to me or displayed where I work.

Signed by student: _____

Date: _____

Parent/Guardian Consent

I the Parent/Guardian* of the above named student have read the Parents and Students Information Leaflet and agree to my child participating in the school's work experience programme. I agree that he/she* should observe the conditions set out by the school and the employer and will encourage him/her* to do so.

My child does/doesn't* have a medical condition that could result in an unnecessary risk to his/her health & safety or of others within the work place. **If you answered 'does' please describe the condition on the separate medical declaration form:**

My child does/doesn't* have a criminal conviction. If you answered 'does' please indicate the nature of the Conviction in the space below.

Criminal Conviction: _____

(Should you have any doubts, please consult Miss N Thompson before signing the form).

Parent/Guardian Name: _____ (Please print) Sign: _____

Date: _____

Consent for Photographs

Students may be photographed during work experience for the purpose of assessment, publicity and training. Please tick the appropriate box and sign below if you agree to your child being photographed during their work experience placement.

Photographed by School only

Photographed by School and Employer

Parent/Guardian Name: _____ (Please print) Sign: _____

Date: _____

Consent for Pre-Placement Interview

I give consent for my child _____ to attend a pre-placement interview (occasionally, this may be during school time) to meet their work experience employer before their placement begins.

Signed by Parent/Guardian: _____ Date: _____