

Dear Parent,

We are pleased to provide the forms and information for your student to participate in the work experience program. We pray that this will be a very rewarding and valuable experience for your student.

Australian Christian Home Schooling has arranged Legal Liability insurance through Aon Risk Services Australia Ltd to pay damages or compensation in respect of personal injury and damage to property. This includes: any student engaged in practical training both on and off campus including but not limited to practical placement, community placements, enterprise experience, work experience, or off campus field assignments.

Please ensure that you read and attend to the forms and letters included here:

1. **Parent/Guardian Permission Slip**  
Complete this form and provide a copy to the employer and one to ACHS prior to commencement of work experience.
2. **Work Experience Student Guidelines**  
Please ensure your student reads and understands the requirements.
3. **Employer's Letter**  
Please give this letter to the employer together with the Employment Details and Provider's Agreement Form, when making the arrangements for the work experience.
4. **Employment Details and Provider's Agreement Form**  
Please give this form to the employer. It must be completed and returned to ACHS BEFORE your student starts, in order to provide information for the insurance cover.
5. **Employer Evaluation**  
Please give this form to the employer. They will complete it and return it to your student or to ACHS at the end of the work experience.
6. **Student's Report**  
Please have your student complete this report and send a copy of it to ACHS at the completion of the work experience.
7. **Parent's Report**  
Please have your student complete this report and send a copy of it to ACHS at the completion of the work experience.

Please retain your original copies of the reports. These are valuable educational records that you may wish to use in the future. The Employer Valuation report can be added to your student's Graduation Certificate Folder.

Please notify the college of any accident involving your student and any damage involving the student during this work experience.

We trust this experience will be rewarding for both your student and the employer. Please do not hesitate to contact us if you require any further information.

Yours in Christ,



Terry Harding  
Manager  
Australian Christian Home Schooling

Dear Employer,

Thank you for accepting our student for work experience.

The student is aware of the fact that he/she is subject to your instructions. Students do not receive payment from the employer. Please provide the student with an induction, covering information about any particular safety requirements of this workplace.

Australian Christian Home Schooling has arranged legal liability insurance through Aon Risk Services Australia Ltd to pay damages or compensation in respect of personal injury and damage to property. This includes: any student engaged in practical training both on and off campus including but not limited to practical placement, community placements, enterprise experience, work experience, or off campus field assignments.

Would you be so kind as to complete the attached employment details form and return it to the student's family? They will post it back to us, before the student begins their work experience. This ensures we have the information required for the insurance cover.

At the conclusion of the Work Experience, the student will offer you an Employer's Evaluation Sheet to be completed. Your cooperation in completing the form is kindly requested. The information will give the student, his/her parents, and the staff of ACHS a valuable assessment of the student's performance. It may be given to the student on departure or forwarded directly to the college.

I wish to extend our thanks and gratitude to you for taking part in our Work Experience Program and assisting in the placement of our students. I hope this causes minimal inconvenience to you and your staff and is a positive experience for the workplace.

Yours faithfully,



Terry Harding  
Manager  
Australian Christian Home Schooling

## WORK EXPERIENCE PROGRAM – EMPLOYMENT DETAILS AND PROVIDER’S AGREEMENT

Please provide the employment details then complete the agreement and sign at the bottom of the form. This form is to be returned before the student starts work experience.

### EMPLOYMENT DETAILS

<b>Student’s Name:</b>			
<b>Firm or Employer’s Name:</b>			
<b>Firm’s address:</b>			
<b>Supervisor’s Name:</b>			
<b>Supervisor’s Phone Number:</b>		<b>Fax:</b>	
<b>Supervisor’s E-mail:</b>			
<b>Type of Work:</b>			
<b>Commencement Date:</b>		<b>Completion Date:</b>	
<b>Starting Time:</b>		<b>Finishing Time:</b>	
<b>Clothing required:</b>			
<b>Lunch Facilities:</b>			
<b>Any other information that may assist the student:</b>			

### WORK EXPERIENCE PROVIDER’S AGREEMENT

1. I understand my obligation of care for the student under the Workplace Health and Safety Act 1995.
2. I agree to inform the student of any particular safety requirements of this workplace.
3. I agree to notify ACHS of any accident involving the student and actions taken, and any damage involving the student during this placement.
4. The student will work under the supervision of myself or my nominee.
5. The hours worked will not exceed the standard hours worked in the industry.
6. Payment will not be made to the student participating in work experience.
7. The student will not perform work that is prohibited by law.
8. This arrangement may be terminated at any time by either the Manager of ACHS or myself.

I confirm that the above student is accepted as a work experience student for the above mentioned period and agree to the above.

<b>Signature of employer:</b>		<b>Date:</b>	
<b>Full Name:</b>			

**Employers:** Please complete this form and return to the student prior to commencement of work experience.

**Families:** Please return this form to ACHS prior to commencement of work experience.

## WORK EXPERIENCE PROGRAM – EMPLOYER EVALUATION

Students: Please hand this form to your employer on completion of your work experience.

### WORK EXPERIENCE DETAILS

<b>Student's Name:</b>			
<b>Commencement Date:</b>		<b>Completion Date:</b>	
<b>Firm or Employer's Name:</b>			
<b>Firm's address:</b>			

### EVALUATION: PLEASE TICK THE APPROPRIATE BOX BELOW

	Excellent	Good	Average	Fair	Poor
1. Ability to follow instructions					
2. Ability to accept criticism and correction					
3. Ability to maintain an even disposition					
4. Ability to get along with fellow employees					
5. Willingness to seek help when it is needed					
6. Sense of responsibility					
7. Sense of initiative					
8. Personal neatness					
9. Courteous manner					
10. Punctuality					
Do you have any comments or suggestions to make about this Work Experience Program?					
Would you be willing to participate in the scheme in future years?	Yes			No	

<b>Signature of employer:</b>		<b>Date:</b>	
<b>Full Name:</b>			

**Employers: Please complete this form after the student finishes their work experience and either return to the student or post direct to:**  
**Australian Christian Home Schooling,**  
**PO BOX 3101, Caboolture BC Qld 4510**



Australian Christian  
Home Schooling  
PO BOX 3101, Caboolture BC Qld 4510  
Ph (07) 3881 5745

**WORK EXPERIENCE PROGRAM – PARENT/GUARDIAN PERMISSION SLIP**

Parents: Please complete this form prior to your student starting work experience.

<b>Student's Name:</b>			
<b>Commencement Date:</b>		<b>Completion Date:</b>	
<b>Firm or Employer's Name:</b>			
<b>Firm's address:</b>			
<b>Employer's Phone Number:</b>			

**WORK EXPERIENCE PERMISSION**

I give permission for my son/daughter, \_\_\_\_\_  
to take part in the Work Experience Program of Australian Christian Home Schooling.

I accept full responsibility for the actions and behaviour of my child while he/she is engaged in the work experience program and I understand that the involvement of my child in the scheme may be terminated at any time by the student, parents, employer or ACHS.

<b>Signature of parent/guardian:</b>		<b>Date:</b>	
<b>Full Name:</b>			
<b>Telephone No. Home:</b>		<b>Work:</b>	

**Parents: Please complete this form and give to the employer on or before the date your student starts work experience and send a copy of the completed form to:  
Australian Christian Home Schooling,  
PO BOX 3101, Caboolture BC Qld 4510.**

## WORK EXPERIENCE PROGRAM – PARENT’S REPORT

Parents: Please complete this form when your student finishes his/her work experience.

<b>Student’s Name:</b>			
<b>Commencement Date:</b>		<b>Completion Date:</b>	

## PARENT’S REPORT

1. Has this Work Experience Program been of benefit to your student? How?


2. In your opinion, how did your student react to the Work Experience Program.


3. What difficulties did he/she experience?


4. Do you think that your student has been made more aware of choosing a career?


5. What suggestions would you make for improving this program?


**Parents: Please complete this form after your student finishes his/her work experience and post a copy to:  
Australian Christian Home Schooling,  
PO BOX 3101, Caboolture BC Qld 4510.**

## WORK EXPERIENCE - STUDENT GUIDELINES

The aims of the Work Experience are:

- a) To allow you to gain first hand knowledge about the world of work and all its complexities.
- b) To assist you in making appropriate and realistic career decisions.

The success of this Work Experience Program depends on you. The willingness of employers to participate in our future Work Experience Programs depends on your behaviour and attitudes while on the job.

Remember that you are a representative of your family, other home schoolers, and ACHS, so behave in an appropriate manner.

The following is a list of responsibilities so that you know what is expected of you:

1. When you arrange the work experience with the employer there is an information letter which needs to be given to the employer. You will also need to give them the employment details and agreement. This needs to be signed by the employer, given back to you and forwarded to ACHS before you start your work experience.
2. Be punctual in your attendance - that means arriving for work on time (preferably early) and arriving back from lunch and tea breaks on time. If you cannot attend work for a day, notify your employer.
3. Show you are willing to learn, ask questions, be co-operative and enthusiastic, accept advice, criticism and instructions graciously - learn to TAKE ORDERS.
4. Your personal appearance reflects your attitudes. Dress appropriately for your particular job in a clean and neat fashion. If a uniform is supplied, care for it as you would your own clothing. Smoking is not considered acceptable under any circumstances.
5. You may be exposed to matters which are of a private and confidential nature. DO NOT repeat what you have seen or heard. Respect the employer's confidentiality.
6. Don't forget that you are a guest, therefore be polite and avoid any display of bad manners, or loud argumentative behaviour.
7. If you make an error, don't worry but report it to your supervisor immediately.
8. NO PAYMENT will be made for the period you are in the program.
9. If the employer sets assignments or requires you to complete a work sheet, do so immediately.
10. Notify ACHS of any accident or damage that you are involved in during your work experience.
11. When you finish the program, thank the employer and the people who have helped you. Write a thank you letter and hand it to your supervisor/employer during the week following your work experience.
12. Be sure to:
  - (a) collect your evaluation sheet from your employer before leaving.
  - (b) complete your own evaluation sheet; and
  - (c) collect your parents' evaluation sheet.

Send copies of the evaluation forms to ACHS with your completed PACE tests at the beginning of the next month. If you have any problems, you are invited to discuss them with us.

Our prayer for you is that you will have good success in your Work Experience.



Terry Harding  
Manager  
Australian Christian Home Schooling

## WORK EXPERIENCE PROGRAM – STUDENT’S REPORT

Students: Please complete this form on completion of your work experience.

<b>Student’s Name:</b>			
<b>Commencement Date:</b>		<b>Completion Date:</b>	
<b>Firm or Employer’s Name:</b>			
<b>Firm’s address:</b>			
<b>Employer’s Phone Number:</b>			

## WORK EXPERIENCE DETAILS

1. What is produced or done at the place where you went to work?
2. Briefly describe the occupation you experienced during this week.
3. What was the most interesting thing you did?
4. Was there anything about this work you didn’t like.
5. Did people in charge explain things to you and help you?
6. Did you find out anything you didn’t know before (about jobs, people, hours, pay rates, etc)?
7. What ideas (if any) did the Work Experience Program give you about a future job or career?

**Students:** Please complete this form after you finish your work experience and post a copy to:  
**Australian Christian Home Schooling,**  
**PO BOX 3101, Caboolture BC Qld 4510.**