Diss High School

Headteacher: Dr J Hunt



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| **Organisation’s work experience Insurance Form** | |
| This form should be given to employers once they have accepted you and offered you a placement. We ask that employers complete and return this form as soon as possible to the address below. Alternatively you can email it.  Employers should keep a copy of the form for reference.    **Mrs Claire Townly – 6th Form**  **Walcot Rd,**  **Diss IP22 4DH**  **Email; clairetownly@disshigh.co.uk** | |
| **Name of Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Work Experience: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**    **Role student will undertake: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | |
| **Working days and times** |  |
| **Meal breaks** |  |
| **Clothing required** |  |
| An **Employer Liability Insurance is mandatory**, could you please complete details:    **Name of Insurance Company**  **……………………………...................................................………………………………..**    **Policy No. ……………………………………….............................….. Expiry Date …………………………………………….** | |
| I confirm that my company has both Public and Employer Liability Insurance, which cover students for Work Experience/Work Related Learning and have attached a copy of:     1. The ELI certificate 2. A relevant young person’s risk assessment (see the example provided)     **Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  (Block Capitals)    **Position Held: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | |
| **In case of emergency, please confirm that you have the emergency contact details of the parents or carers of the student.**    **Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  (Block Capitals)    ***For safeguarding purposes, if you have a concern about the welfare of a student, please contact the MASH team on***  ***0344 800 8020***    ***If you have a concern about the behaviour of an adult, please contact the LADO on 01603 223473***    ***In other emergencies please call 999*** | |

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