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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