

Work Experience Own Placement Form

Please print carefully in block capitals

School		Dates of Work Experience	
Student Name		Tutor group	
Home Postcode		Month & Year of Birth	/

The section below must be completed by the employer who has agreed to take you on placement

All placements are subject to a pre placement visit by the EBP

Placement Details, Insurance & Employer Agreement			
Company Name		Contacts Name	
Company Address & Postcode		Position	
		Telephone No	
		Is this a home Address?	
Placement Address: (if different from above)			
Email Address		How is the student known to you?	
Main tasks the student will undertake			
I.....(name) from(company) am authorised to offer the work placement as detailed above.			
**** I understand the placement may be cancelled or cut short by either party for COVID 19 reasons ****			
Employers Liability Insurance held with			
Policy No		Expiry Date	
Signed*		Date	
Please can you attach a copy of the current Employers Liability Certificate to this form			
Parent/Student Agreement			
I understand that this placement will not be definite until it is confirmed by the EBP and insurance and pre placement check has been made. Please note there may be a charge for placements outside our EBP area where other agencies may be required to carry out a pre-placement check on our behalf. These charges may vary.			
Student Signature*		Date	
Parent/Guardian Signature*		Date	

* In the case of the EBP not being able to sanction the placement a £25.00 administration fee will be charged and may be passed on by the school

* By signing this you are confirming you have read, understood and agreed to how we are going to use, and store, personal information (Detailed overleaf)

EBP ADMIN	DETAILS	DATE	INITIALS
PLACEMENT			
EMPLOYERS LETTER & RF			
STUDENT DESCRIPTION			
STAFF VISIT			

How information about the student will be used and who we will share the student information with -

In order to manage the placement, EBP will process the student's personal data that is shared with us. This may include the student's name, school, employer, start and end dates and any special data shared with us (such as medical information). We will also share this data with the employer so that the employer can provide a work placement. EBP takes great care to look after personal data - you can read how we do this at

<http://educationbusinesspartnership.co.uk/privacy-policy/>

How long we will keep information about the student - We will keep the information until the student is 25 years old, which is a legal requirement.

If you need any further information - Please email us at info@ebpwb.co.uk

Work Placement Provider: How information about you will be used

Members of the EBP work experience team will store this information about your organisation on our secure database. Some of the information will be given to the relevant schools and students that have work experience placements with you.

How long we will keep information about you

We review our database on an annual basis and will destroy records of organisations that have not had a work experience placement for over 10 years.

Who we will share your information with

We will give your name, company name, address, email address and telephone number to the school which will also be given to the student and his/her parents. This is so that they can prepare for the work experience placement.

If you need any further information

Please email us at info@ebpwb.co.uk or to view our privacy policy, please visit our website

<http://educationbusinesspartnership.co.uk/privacy-policy/>