***Skilling South Australia Projects***

Work Placement Log

Updated: x January 2019

|  |  |
| --- | --- |
| Participant name |  |
| Business/ Workplace name |  |
| Date of work placement | to |

*A new log must be used for each new work placement.*

**Information for the Skilling South Australia Projects Proponent**

A Work Placement Log must be completed for all participants who are involved in a Skilling South Australia Project that contractually includes a work placement as part of the project.

The Work Placement Log must be retained by the funding recipient (ie the Proponent) for audit purposes. Copies are not required by the Department for Industry and Skills unless specifically requested, to verify the Work Placement Declaration completed with the Milestone Payment Request form for work placement milestone payments.

This form is provided for Proponents who do not have an existing template. Proponents may use their own template, as long as the information required below is captured.

If accredited training is delivered as part of the project, the RTO should have oversight of the planned activities to be undertaken during work placements, to ensure they complement what the participant is learning off-job.

**Information for the Workplace Supervisor**

Thank you for agreeing to host the participant for work placement.

The participant you have agreed to host is participating in a Skilling South Australia Project, which is designed to support apprenticeships and similar activities.

Learning on-the-job is a very important component of the participant’s training. Not only will they learn technical skills, they will also develop a range of other more generic skills that many employers say are vital to employability.

As a host, you are responsible for providing a safe work environment, providing adequate orientation and supervision, and giving participants opportunities to undertake meaningful tasks that complement their training.

**The participant will ask you to verify the hours he/she has worked** (see pages 5 & 6)

**Please complete section 5 – Supervisor Declaration, when the work placement has been completed**.

**Information for the Participant**

Learning on-the-job through work placement is a very important component of your Skilling South Australia Project. The focus of your work placement will be to develop a range of technical and generic workplace skills, and provide an opportunity for you to experience the industry and develop connections with employers.

This Work Placement Log comprises 5 sections and provides a record of your hours in the work place.

You are responsible for completing sections 1, 2, 3 and 4. Your workplace supervisor will need to complete section 5.

## 1. Key information *(participant to complete)*

***Participant details***

|  |  |
| --- | --- |
| First Name |  |
| Last Name |  |
| Date of Birth |  / /  |
| Contact No. |  |

***Parent/Guardian contact details (if participant is under 18 years)***

|  |  |
| --- | --- |
| Name |  |
| Home telephone number |  |
| Work telephone number |  |
| Mobile telephone number |  |

***Participant’s emergency contact***

|  |  |
| --- | --- |
| Name |  |
| Relationship |  |
| Telephone number |  |

***Medical***

|  |  |
| --- | --- |
| Participant’s doctor |  |
| Telephone number |  |

***Business/Workplace information***

|  |  |
| --- | --- |
| Name of supervisor |  |
| Name of business |  |
| Telephone number |  |

## 2. About the work placement *(participant to complete)*

In the space below, write down some background information about the actual workplace and the work you did during the placement.

|  |  |
| --- | --- |
| Industry type (eg automotive) |  |
| Business activity (eg servicing cars) |  |
| Workplace environment (eg office, workshop) |  |

Summarise the tasks undertaken

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Provide examples of the equipment/ tools/ software used

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## 3. Work placement hours log *(participant to complete)*

* Participants are required to record the hours spent on work placement by completing the log below.
* The workplace supervisor must then verify the time spent in the workplace by signing each entry.
* Breaks (lunch etc) are NOT included in the Daily Hours.
* Additional copies of this page may be taken if needed
* Alternatively, if the participant is already using timesheets at the work place, these can be attached.

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| --- | --- | --- | --- | --- | --- |
| **Date** | **Start Time** | **Break** | **Finish Time** | **Daily Hours****(excl lunch)** | **Supervisor’s Signature** |
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| --- | --- | --- | --- | --- | --- |
| **Date** | **Start Time** | **Break** | **Finish Time** | **Daily Hours****(excl lunch)** | **Supervisor’s Signature** |
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| **TOTAL HOURS** |  |  |  |  |  |

## 4. Participant Declaration *(participant to complete)*

I verify that I have undertaken the work placement outlined in this log, and that the written reflections are my own work.

Student’s signature: ……………………………………………………. Date:….……/……..…/………..………..

### 5. Workplace Supervisor Declaration *(Supervisor to complete)*

|  |  |
| --- | --- |
| Supervisor’s name |  |
| Supervisor’s title/position |  |

**Tasks performed by student**

I agree the tasks identified by the participant above were undertaken: ☐ Yes ☐ No

Please summarise any additional task/s the student performed while in the workplace:

|  |  |
| --- | --- |
| Additional tasks |  |

I verify that the student has undertaken the work placement outlined.

Supervisor’s signature: ……………………………………………………. Date:….……/……..…/………..………