



Year 10 Work Experience

Monday 23rd March – Friday 27th March 2026



Why do it?

Proven to help students with their employability skills;

- Gaining a better understanding of the world of work
- Self-confidence and communication skills
- Discover what employers are looking for when hiring...

...and much more!





Partnership with EBP South

- Working alongside EBP to secure placements
- EBP complete all the checks and paperwork
- Consent paperwork is sent home, and parents/carers should sign this and return to school
- EBP will charge the school a fee per student per secured placement.
- The school is asking for a £30 donation towards the cost of securing your child's placement.



Student's Name:		Date of Birth:		Securing				
School:					J JCUIIII)			
EMPLOYER								
Company / Organisation nar	16							
Nature of business			No	o of employees	•			
Main contact person		Position						
Workplace address		Postcode	Employer's List	bility Insurance				
			Insurer					
			Palicy Number					
Tel	Mob		Expiry Date					
Erral								
Placement Details			-					
Job Title					Francisco I inhility in a MUCTU			
Job Description (Please list t	he key tasks and / or a	ctivities that the stude	nt will undertake)		Employer Liability is a MUST!			
				EMPLOYER CON	FIRMATION AND AGREEMENT			
				I confirm that:	Confirm that: - to the best of my knowledge and belief, the information given above is correct I have read the attached Letter of Understanding and that all the points are acceptable to me.			
					I confirm that the Job Description is correct.			
Requirements (special requi	rements, including any	dress code, that apply	y to this job)		As representative of the employer I agree to the student named above working on our premises, and to abide by all legislation relating to Equal Opportunities. Health and Safety and Child Protection, I will arrange for my Employer's Liability insurance to provide dover against accident and			
				injury caused to the	student by negligence of the employer or another employee and will accept or insure myselfagainst lability for loss, damag he student in the same way as for other paid employees. My company lorganisation has prepared a Risk Assessment (if			
					system of work which covers all the tasks we expect this dudent to undertake.			
No of working days:	Start d	late:	End date:	Employer signature _	Employer signature Date			
Working times/ meal breaks:				Name				
Would you offer this opportunity to another young person: YES NO (please circle)				As the student nam	STUDENT As the student named I agree to take part in this work experience programme. I also agree to hold in confidence any information about the employer's business which I may obtain during this work period and not to disclose such information to any other person without the Employer's permission. I also agree to observe all safety, security and other regulations laid down by the Employer and			
Bids Accountant								
			on employers and the self-empl	loy made known to me	either by the Employer's representative or by the displayed instructions. I will pass on to my parent or guardia ven to me by my employer, which may affect my personal health, safety or welfare.			
that the employer shall make a suitable and sufficient assessment of the risk to employees." This includes employees who are classed as a child (below minimum school leaving age) and a young perso.				750				
			may be relevant to students on	Name and Address of the Owner, where the Owner, which is the Owner, where the Owner, where the Owner, where the Owner, where the Owner, which is the Owner, which i	CONTRACTOR OF THE CONTRACTOR O			
			parents/guardians of the child eventative and protective mea		R with legal responsibility for the student (the student named above I confirm that I have read and understood this form, and the Job Description and			
			orkexperience/placegrovide.hts	m Health and Safety S	tatement. I agree to his/her taking part in this programme and undertake that he/she will observe the condition			
					firm that he/she does not suffer from any medical or other condition which could result in unnecessary risk to fety or to the safety of another person. (Should you be in any doubt please consult the teacher responsible			
				before signing this				
					she leaves the employer's premises during lunch or break periods, no liability can be accepted by the employer			
				or the school for an	y incident that may occur. Once on the placement, parents should discuss the arrangements for lunch and bres			

Find a placement for your child

a placement

• Ask the employer to complete this 'Own Placement form'.

 Must be signed by employer, student and parent/carer

· Return to school



Student's Name:		Date of Birth:							
School:									
EMPLOYER									
Company / Organisation name									
Nature of business			No of employees						
Main contact person		Position							
Workplace address		Postcode	Employer's Liability Insurance						
			Insurer						
			Palicy Number						
Tel	Mob	Web		Expiry Date					
[mail	· ·								
Placement Details									
Job Tirtle									
Job Description (Please list the key	tasks and / or activit	ies that the stude	nt will under	take)					
Requirements (special requirements, including any diress code, that apply to this job)									
	70								
No of working days:	Start date:	Start date:		End date:					
Working times / meal breaks:				A.O.					
Would you offer this opportunity to another young person: YES NO (please circle)									
Risk Assessment									

The Management of Health and Safety at Work Regulations place a duty on employers and the self-employed. The duty states that the employer shall make a suitable and sufficient assessment of the risk to employees."

This includes employees who are classed as a child (below minimum school leaving age) and a young person (over minimum school leaving age, but under 18 years of age). Both of these definitions may be relevant to students on work experience. In addition, "Every employer shall, before employing a child, provide the perents/leaved in the child with comprehensible and relevant information on the risks identified by the assessment and the preventative and protective measures.

More information available at: https://www.hoe.gov.uk/youngpeople/workszerience/placegoroxide.htm



Securing a placement

 Return to school- <u>There will be a work experience</u> tray on the Student Services desk.

 School will send the form to EBP South to do their checks and sign off the placement

 A consent form will be generated, and school will send this out to parents/carers

Please sign this and return to school

The placement is then complete!





Where do I find the Own Placement Form?

- All tutors will have paper copies available to give out to students if you need it printing
- Electronic copies are available from the website, a link to this is in the information letter, as well as below.

https://www.perins.net/schoollife/careers-programme/workexperience

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Last messages

Important Dates

8th January 2026 – Deadline for Own Placement forms to be handed in to school

20th March 2026 - All consent forms returns to school

Monday 23rd- Friday 27th March – Work experience

- Any questions please email workexperience@perins.hants.sch.uk
- If you need any help finding your child a placement, please either contact your child's tutor or use the email address above.
- Please use your child's Scopay account to donate £30 towards their placement fee
- Once a placement is completed, we strongly suggest that students contact the employer before the placement is to start.

