

Workplace Learning will be coordinating your compulsory work placement in 2016.

In order to undertake work placement, we require you to submit an online registration form. This information enables us to generate a Student Placement Record for you, and its completion ensures the appropriate insurance and indemnity arrangements are in place for your work placement.

01 STUDENT – LOG ONTO WWW.STUDENTREGO.COM

02 ENTER THE REGISTRATION CODE GIVEN TO YOU BY YOUR TEACHER

- 02.1 This is a 5 digit number
- 02.2 If you enter the wrong number, Workplace Learning won't receive your registration and you risk missing out on a work placement



03 ENTER INFORMATION INTO ALL THE FIELDS

- 03.1 The form will not submit unless all fields are entered
- 03.2 If you choose not to enter information, simply type N/A
- 03.3 If you choose not to enter an email, simply type 000@000.com (or ask your guardian or teacher if you can use theirs)
- 03.4 If you choose not to enter a mobile, simply type 000 000 0000
- 03.5 Please use capitals where necessary and be very careful with your spelling. This information will be printed onto a Student Placement Record, which will ensure you have insurance on work placement

04 READ THE DOT POINTS BEFORE SUBMITTING YOUR FORM

- 04.1 It is very important that you read the information as there are obligations that you need to be aware of
- 04.2 If you have problems submitting your form, please contact your local Workplace Learning office (details below)

05 ADVISE YOUR TEACHER THAT YOU HAVE SUBMITTED YOUR FORM

CONTACT US

Illawarra
1/116 Corrimal Street | PO Box 1818
WOLLONGONG NSW 2500
P: 4225 2526 | F: 4226 3614
E: wollongong@iswlp.org.au

Shoalhaven
5/21 Kinghorne Street | PO Box 367
NOWRA NSW 2541
P: 4422 0988 | F: 4422 0966
E: nowra@iswlp.org.au

Southern Highlands
P: 4862 5683
E: bowral@iswlp.org.au

South Coast
5/73 Vulcan Street | PO Box 876
MORUYA NSW 2537
P: 4474 5134 | F: 4474 5164
E: moruya@iswlp.org.au

ABN: 23 139 481 124 | W: www.iswlp.org.au www.facebook.com/WLISSH

VET WORK PLACEMENT STUDENT REGISTRATION EXAMPLE

Welcome to the Vocational Placement Request form.

Please complete the following form for submission to Workplace Learning.

School Name Corrimal High School
Teacher Name John Smith
Area Of Study Information & Digital Technology

Given Name Required
Surname Required
Gender Male Female Required
Date of birth Required
Year Level Required
Indigenous Yes No Required

Home Address Details

Home Address Required
Suburb Required
State State Required
Postcode Postcode

Your **School, Teacher & Area of Study** will always be pre filled out here – if you don't see the right class, try going back and re-entering the new code – if you register in the wrong class by accident – just make sure to tell your teacher so they can make Workplace Learning aware.

Phone & Email Details

Home Phone
Your Mobile Required
Email Address Required

Disability Details

Do you have a disability that may affect your vocational placement?
 Yes No Required

Disability Notes

Medical Details

Do you have a medical condition of which an employer should be aware?
 Yes No Required

List any special requirements the employer needs to consider during placement

Emergency Contact Details

Contact Name Required
Phone/Mobile Required

If you have no **Phone** or **Email** it is suggested that you ask your parent/carer or teacher if you can use theirs. If not, you will need to enter something that is in the correct 'mobile' or 'email' format like below:

Phone & Email Details

Home Phone
Your Mobile
Email Address

VET WORK PLACEMENT STUDENT REGISTRATION EXAMPLE

The information provided by you is used to support the needs of the prospective host employer and to allow the proposed work placement to be established.

Providing this information is voluntary, however if you do not provide the information requested, you may not be able to undertake the work placement. The information you provide will be stored securely and will only be disclosed for the purposes of which it was collected.

- I request Workplace Learning to obtain a Vocational Placement for me using the above information, which is true and correct.

- I have read and accept the conditions and privacy information.

- I am willing to travel to the required location of work placement, either by public or private transport.

- I will phone my host employer to arrange for an interview and signing of the Student Placement Record prior to the commencement of placement.

- I will obtain all signatures required for the Student Placement Record and return it to my school at least 1 week prior to my placement. I understand my placement will be cancelled if I fail to return the Student Placement Record.

- I understand work placement is a compulsory component of the HSC VET course and if I do not attend the organised placement, I will have to organise a placement myself.

Click the button below to indicate you agree with this declaration and to submit your registration form.

AGREE AND SUBMIT

Carefully read the information above as there are obligations that you need to be aware of and hit **AGREE AND SUBMIT**



WORKPLACE LEARNING

Thanks for your registration, .

Thanks for your placement request and registration!