

Accommodation away from home

This form is to be completed and returned for school approval by: ____ / ____ / ____

This document is to be referenced against the current *Workplace Learning Procedures* and used when the student requires overnight accommodation away from home. No part of the existing text may be altered, deleted or added to. The principal must sign this form noting that suitable accommodation and travel arrangements are in place for the student during their work placement. This form is to be attached to the original *Workplace Learning Agreement form*.

Student name:
School:
Work placement provider:

Section A: Work placement details	School to complete						
Identify reason for the placement, the educational value of the experience and the lack of opportunity in the local community:							
<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Dates and times negotiated for school to make contact during placement:</div> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; padding: 5px;">Student:</td> <td style="width: 25%; padding: 5px;"><input type="checkbox"/> Contact 1:</td> <td style="width: 25%; padding: 5px;"><input type="checkbox"/> Contact 2:</td> </tr> <tr> <td style="padding: 5px;">Work Placement Provider:</td> <td style="padding: 5px;"><input type="checkbox"/> Contact 1:</td> <td style="padding: 5px;"><input type="checkbox"/> Contact 2:</td> </tr> </table>		Student:	<input type="checkbox"/> Contact 1:	<input type="checkbox"/> Contact 2:	Work Placement Provider:	<input type="checkbox"/> Contact 1:	<input type="checkbox"/> Contact 2:
Student:	<input type="checkbox"/> Contact 1:	<input type="checkbox"/> Contact 2:					
Work Placement Provider:	<input type="checkbox"/> Contact 1:	<input type="checkbox"/> Contact 2:					

Section B:	Overnight accommodation details	Parent / caregiver / independent student* to complete						
Physical address of overnight accommodation during placement:								
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 35%; border: 1px solid black; padding: 5px;">Accommodation type:</td> <td style="width: 65%; border: 1px solid black; padding: 5px;">Accommodation to be shared with</td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> Private home</td> <td style="padding: 5px;"><input type="checkbox"/> Parent/caregiver <input type="checkbox"/> Friend/s of the family <input type="checkbox"/> Work placement provider</td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> other (provide details):</td> <td style="padding: 5px;"><input type="checkbox"/> Other family member/s eg grandparents, aunt/uncle <input type="checkbox"/> Other (provide details):</td> </tr> </table>			Accommodation type:	Accommodation to be shared with	<input type="checkbox"/> Private home	<input type="checkbox"/> Parent/caregiver <input type="checkbox"/> Friend/s of the family <input type="checkbox"/> Work placement provider	<input type="checkbox"/> other (provide details):	<input type="checkbox"/> Other family member/s eg grandparents, aunt/uncle <input type="checkbox"/> Other (provide details):
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<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Overnight accommodation has been arranged by:</div> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; padding: 5px;"><input type="checkbox"/> Parent/caregiver/Independent student*</td> <td style="width: 33%; padding: 5px;"><input type="checkbox"/> Work placement provider</td> <td style="width: 34%; padding: 5px;"><input type="checkbox"/> School</td> </tr> <tr> <td colspan="3" style="padding: 5px;"><input type="checkbox"/> Other (provide details):</td> </tr> </table>			<input type="checkbox"/> Parent/caregiver/Independent student*	<input type="checkbox"/> Work placement provider	<input type="checkbox"/> School	<input type="checkbox"/> Other (provide details):		
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<input type="checkbox"/> Other (provide details):								
<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Adult responsible for supervising the student during overnight accommodation</div> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%; padding: 5px;">Name: _____</td> <td style="width: 30%; padding: 5px; text-align: center;"><i>Relationship to student</i></td> </tr> <tr> <td style="padding: 5px;">Daytime telephone: _____</td> <td style="padding: 5px;">Evening telephone: _____</td> </tr> <tr> <td colspan="2" style="padding: 5px;">What are the travel arrangements for the student to reach their workplace:</td> </tr> </table>			Name: _____	<i>Relationship to student</i>	Daytime telephone: _____	Evening telephone: _____	What are the travel arrangements for the student to reach their workplace:	
Name: _____	<i>Relationship to student</i>							
Daytime telephone: _____	Evening telephone: _____							
What are the travel arrangements for the student to reach their workplace:								

Parent / caregiver to sign and date
<input type="checkbox"/> I approve the overnight accommodation and the proposed travel arrangements for my child. <i>(please tick)</i>
<input type="checkbox"/> I have discussed arrangements with the adult responsible for the provision of overnight supervision of my child <i>(please tick)</i>
Parent/caregiver name: <i>(print)</i>
Parent/caregiver signature:
Date:
Independent student signature:
Date:

This form must be signed by the principal in accordance with the current <i>Workplace Learning Procedures</i>
Principal name: <i>(print)</i>
Principal signature:
Date:

