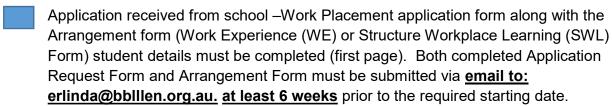


WORK PLACEMENTS WEXP / SWL PROCEDURE AND CHECKLIST



- BBLLLEN will contact appropriate supervisor at Latrobe City Council (LCC) and will attached both forms WE/SWL form and Application Request form. **Each student application is considered individually, for 1 term only.**
- Provisional Placement Approved by LCC Staff by signing the Employer
 Acknowledgement section (employer to sign) of the arrangement form signed and dated
 the form and return this via email to: erlinda@bblllen.org.au.
- Once BBLLEN staff received the signed provisional arrangement form from LCC supervisor, BBLLEN staff will send the following documents to career adviser to complete the process by completing all forms with their student. These are:

For principal signature

- Work experience arrangement form or;
- ☐ SWL arrangement form

For Student to complete

- □ Confidentiality Statement Form
- Statement by Supplier Form (for payment purposes)
- □ Supplier Application Form (for payment purposes)
- ☐ Student Excursion Medical Form

All of the above paperwork needs to be completed at the earliest or no later than three
(3) weeks prior the student commencing. Please note that if any the paperwork above are incomplete the placement cannot go ahead. Ensure that all paperwork above must be completed and return these via erlinda@bblllen.org.au.

These documents need to be forwarded to the relevant supervisor at LCC (eg: Julie Griggs for Family Services)

A confirmation letter to student will be issue by BBLLLEN staff and this will be copied to career adviser and the supervisor.

Not approved – will advise school ASAP

For all Latrobe City Council student placement to contact Erlinda James 5633 2868 or mobile 0419 298 064



Latrobe Work Placement Application Form

PLEASE COMPLETE ALL SECTIONS OF THIS APPLICATION

School attending:		Yea	r level in:		
Age Date of Birth: _	_//	Gender: Fem	ale / Male		
Given Names (all):					
Family Name or Surname:					
Address:					
Suburb / Town:	State	:	Postcode:		
Home Telephone:	Mobile:				
Email:			. <u> </u>		
Does student identity as Aboriginal and/o	or Torres Strai	t Islander?	□Yes	□no	
If yes, would they like to speak to an Abo	riginal staff m	ember @ Latro	be? 🗆 Yes	□no	
Do you require a:-					
☐ Work Experience Placement (5 day/w	veek long blo	ck)			
Date requested: From/		to			
OR					
☐ Structured Workplace Learning Place	ment SWL (<i>or</i>	ne day per weel	k for duration o	of school term)	
Starting date requested:/	/	to	/		
Preferred Day of the week:					
Are you studying VCE or VCAL?	□ vce	\square VCAL		Year 10	
Are you undertaking VET studies: YES	NO				
Which course: (e.g Cert II in Engineering	at Fed Traini	ng, Yallourn)			

note some departments are unavailable
\square Latrobe Regional Airport
\square Latrobe Regional Gallery
\square Libraries
☐ Parks & Gardens
☐ Planning & Building
□ ІТ
☐ Latrobe Performing Arts Centre
☐ Events Management
☐ Tourism
☐ Health Department
tee an offer of a work placement
Date: / /
Coordinator completes the section below
,
te:/

This completed application form must be returned by email to the BBLLLEN at least 6 weeks prior to the required starting date, email to:

erlinda@bblllen.org.au

For further information: contact Erlinda James 5633 2868 or mobile 0419 298 064

