

Work placement journal (reflection and reminder tool)

**For students undertaking short-term,
observation-only workplace learning**

Printable version



Placement details

To be completed before placement begins

Business name:

Business phone: Email: Website:

Business address:

Business contact person: Title (e.g. Manager):

Hours of work:

Start Finish

Break times:

Start Finish

Start Finish

Lunch arrangements: for example, do you bring your lunch, is there a canteen/shop to purchase lunch, is there a fridge to store your food?

Clothing arrangements: for example, are you required to wear particular clothing items or clothing of a particular colour?

Transport arrangements: for example, how you will get to and from the workplace

Any other special arrangements: for example, with regards to health, food, religious practices

Occupation details

To be completed before placement begins. Find these details by searching for the occupation on the [myfuture](#) website (log in required).

Job title:

What **educational qualifications** are required for this occupation?

Describe some of the **main tasks** you would be expected to perform in this occupation:

Highlight any **tasks** in the above list that you think **you might be expected to perform** during your week of work experience.

Describe some of the **personal skills** that would help you carry out this type of work:

Workplace induction record

On your first day you will have a workplace induction (an introduction to the workplace and things you need to know). Use the table below to record the information you are given during your induction and information sessions. Keep it to hand and refer back to it as necessary during the placement.

 <p>Time-keeping</p>	<p>Aim to arrive 10 to 15 minutes before your start time. Insert the start time for your role.</p> <p>Start time <input type="text"/></p> <p>Breaks <input type="text"/></p> <p>Lunch time <input type="text"/></p> <p>Duration <input type="text"/></p> <p>Finish time <input type="text"/></p>
 <p>Personal protection equipment (PPE)</p>	<p>What PPE is required in this workplace?</p> <p>How do you use this equipment?</p> <p>Why is this equipment used?</p>
 <p>Mobile device policy</p>	<p>For work ethics and safety reasons mobile devices are often not permitted while on the job. What is this company's policy?</p> <p>When can mobile devices be used?</p>
 <p>Emergency procedures</p>	<p>Who is the Health and Safety Officer?</p> <p>Where are the emergency exits?</p> <p>Who is the fire warden?</p> <p>If there is an emergency evacuation, where are the meeting points? How do you know you know where they are?</p>
 <p>Dress code</p>	<p>What is the dress code for the department you are working in?</p> <p>If there are other departments in this workplace, what are the dress codes?</p>



Social media

What are the rules for how the organisation and its employees conduct themselves (behave) when they use social media?

What can you post?

What can you not post?

Workplace observations

Day 1

Date:

Major tasks undertaken

In the spaces below, list the main tasks you completed at work today.

Which of the following core competencies did you use today? Which area of your current study do you think these competencies relate to?

Employability skill	Yes	No	N/A	Study area
Communication				
Teamwork				
Problem solving				
Initiative and innovation				
Planning and organising				
Digital literacy				
Lifelong learning				
Numeracy				
Literacy				

Complete a diary entry for today in the workspace below.

Today I

Student's signature:

Supervisor's comment (optional)

Supervisor's signature:

Workplace observations

Day 2

Date:

Major tasks undertaken

In the spaces below, list the main tasks you completed at work today.

Which of the following core competencies did you use today? Which area of your current study do you think these competencies relate to?

Employability skill	Yes	No	N/A	Study area
Communication				
Teamwork				
Problem solving				
Initiative and innovation				
Planning and organising				
Digital literacy				
Lifelong learning				
Numeracy				
Literacy				

Complete a diary entry for today in the workspace below.

Today I

Student's signature:

Supervisor's comment (optional)

Supervisor's signature:

Workplace observations

Day 3

Date:

Major tasks undertaken

In the spaces below, list the main tasks you completed at work today.

Which of the following core competencies did you use today? Which area of your current study do you think these competencies relate to?

Employability skill	Yes	No	N/A	Study area
Communication				
Teamwork				
Problem solving				
Initiative and innovation				
Planning and organising				
Digital literacy				
Lifelong learning				
Numeracy				
Literacy				

Complete a diary entry for today in the workspace below.

Today I

Student's signature:

Supervisor's comment (optional)

Supervisor's signature:

Workplace observations

Day 4

Date:

Major tasks undertaken

In the spaces below, list the main tasks you completed at work today.

Which of the following core competencies did you use today? Which area of your current study do you think these competencies relate to?

Employability skill	Yes	No	N/A	Study area
Communication				
Teamwork				
Problem solving				
Initiative and innovation				
Planning and organising				
Digital literacy				
Lifelong learning				
Numeracy				
Literacy				

Complete a diary entry for today in the workspace below.

Today I

Student's signature:

Supervisor's comment (optional)

Supervisor's signature:

Workplace observations

Day 5

Date:

Major tasks undertaken

In the spaces below, list the main tasks you completed at work today.

Which of the following core competencies did you use today? Which area of your current study do you think these competencies relate to?

Employability skill	Yes	No	N/A	Study area
Communication				
Teamwork				
Problem solving				
Initiative and innovation				
Planning and organising				
Digital literacy				
Lifelong learning				
Numeracy				
Literacy				

Complete a diary entry for today in the workspace below.

Today I

Student's signature:

Supervisor's comment (optional)

Supervisor's signature:

Workplace supervisor's evaluation of student performance

Note: Your workplace supervisor will discuss this form with you.

Student's name:

Company/business/organisation name:

Workplace department:

Workplace supervisor's name (please print):

Workplace supervisor's signature: Date:

Please complete the following evaluation after each 38 hours completed in the workplace (or at the end of the placement if fewer than 38 hours are completed).

For each student attribute, tick the box that contains the most appropriate description of the student's workplace performance.

Personal attributes	Not yet satisfactory	Satisfactory	High	Very high
Enthusiasm	<input type="checkbox"/>	Observes and listens, follows instructions and performs most tasks enthusiastically. <input type="checkbox"/>	Maintains an enthusiastic approach to all tasks. <input type="checkbox"/>	Extremely motivated and keen. Prioritises tasks and takes responsibility for own workload. <input type="checkbox"/>
Approach to safety	<input type="checkbox"/>	Follows safety rules in the workplace, Maintains own safety and carries out work duties in a safe manner. <input type="checkbox"/>	Observes specific workplace safety policies, procedures and standards and acts to minimise risks to self. <input type="checkbox"/>	Observes specific workplace safety policies, procedures and standards and acts to minimise risks to self and others. <input type="checkbox"/>
Approach to learning	<input type="checkbox"/>	Willing to learn and asks for assistance or clarification if needed. <input type="checkbox"/>	Shows interest in the work and the industry area. Asks good questions and listens attentively. <input type="checkbox"/>	Eagerly seeks new and more challenging tasks to extend workplace skills and knowledge. <input type="checkbox"/>
Approach to others	<input type="checkbox"/>	Relates well to co-workers and is comfortable in a work environment. <input type="checkbox"/>	Interacts with co-workers and clients in a confident and friendly manner. <input type="checkbox"/>	Communicates effectively with co-workers, seeks others' opinions and begins to cultivate networks <input type="checkbox"/>
Reliability	<input type="checkbox"/>	Can be relied on to complete allocated tasks. <input type="checkbox"/>	Can be relied on to complete allocated tasks and follow the job through when faced with difficulties. <input type="checkbox"/>	Is totally reliable and shows determination in resolving difficult tasks. <input type="checkbox"/>
Initiative	<input type="checkbox"/>	Completes routine or familiar tasks without direct or repeated instruction. <input type="checkbox"/>	Thinks ahead and often completes tasks without prompting. <input type="checkbox"/>	Works independently and collaboratively, solves problems and is resourceful. <input type="checkbox"/>

Personal attributes	Not yet satisfactory	Satisfactory	High	Very high
Response to advice	<input type="checkbox"/>	Listens to advice and acts on it. <input type="checkbox"/>	Acts on advice and seeks feedback to improve work performance. <input type="checkbox"/>	Actively seeks feedback to improve work performance and applies advice to different situations. <input type="checkbox"/>
Quality of work	<input type="checkbox"/>	Completes given tasks to required standard <input type="checkbox"/>	All work is of a high standard and self-checks are made for quality. <input type="checkbox"/>	Work is always of a high quality. Pays attention to detail and takes pride in completing tasks to a very high standard. <input type="checkbox"/>

Comments

Work experience – parent/ guardian/carer evaluation

Name of student:

Host workplace:

1. Did your child benefit from this placement? If so, how?

2. How did your child cope with the placement?

3. If your child had any difficulties, what were they?

4. Did the work placement give your child experiences that could help them decide on a career?

5. How could the school work experience program be improved?

6. Do you have any other comments on your child's work experience?

Parent/Guardian/Carer name:

Parent/Guardian/Carer signature:

Thank you for taking the time to complete this evaluation.