



## WORKPLACE LEARNING AGREEMENT FORM

The Workplace Learning Agreement form must be completed prior to a student undertaking any type of workplace learning as defined by the relevant sector's Workplace Learning Procedures.

### SCHOOL DETAILS

School name: <b>Avenues College</b>	School contact name: <b>Michelle Povey</b>	
Email: <b>michelle.povey834@schools.sa.edu.au</b>	Mobile:	Phone: <b>82612733</b>
Address:		

### TYPE OF WORK PLACEMENT:

<input checked="" type="checkbox"/> Work experience	<input type="checkbox"/> Virtual work experience	<input type="checkbox"/> Structured workplace learning	<input type="checkbox"/> Work trial leading to an apprenticeship or traineeship for a school student
Industry area or VET course linked to this placement:			

### Section 1: STUDENT

*This section is to be completed under the guidance of the home school.*

1.1 Student name: <b>NADITH JAYAWARDANE</b>	Mobile: <b>0438 151 607</b>	Home phone: <b>0477 438712</b>
Email: <b>udayawar12@gmail.com</b>	D.O.B: <b>25/10/2008</b>	Year level/home group/class: <b>10</b>
Additional needs: Identify any medical condition, medication, disability or learning needs that may impact this student on work placement including adjustments required. If none, please record not applicable. <b>NO</b>		

1.2 Parent/caregiver name: <b>RUWAN JAYAWARDANE</b>	Relationship to student: <b>FATHER</b>
Email: <b>udayawar12@gmail.com</b>	Alternative phone number: <b>0477 438762</b>
Address: <b>5, BUCKINGHAM CT, WINDSOR GARDENS SA 5087</b>	

Does the student need to travel away from home (not their usual place of residence) which requires an overnight stay to access the work placement?

Yes ☐ complete section 1.3      ☒ No proceed to section 1.4

1.3 Away from home supervisor name:	Relationship to student:
Away from home address:	Phone:
1.4 Emergency contact name:	Relationship to student:
Email:	Phone:
Mobile:	
Address:	

1.5 Student learning goal: (eg as part of my Exploring Identities and Futures I want to find out more about a career as an electrician).