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## FC6W51 Work Related Learning (WRL) Form

**Student**

**Student Londonmet ID:** 17030952

**Student Name:** Pranaya Pradhan

**College E-mail ID:** np01cp4a170020@islingtoncollege.edu.np

**Mobile No:** 9860659800

**Student’s work/placement address:** Narayanhiti Path, Hitti Pokhari, Kathmandu

**Employer**

**Employer Name:** Mercantile Office System Pvt. Ltd.

**Employer's Address including department:** Narayanhiti Path, Hitti Pokhari, Kathmandu and Software Department

**Company Supervisor’s Name and Position:** Nilan Joshi, Senior Software Executive

**Company Supervisor’s Tel No:** 9851048306

**Company Supervisor’s email address:** [nilan@mos.com.np](mailto:nilan@mos.com.np)

**Work Related Learning Activity**

**Start Date:** 29th August 2019

**End Date (if known):**

**Your role at the placement (position):** Trainee (Intern)

**Brief description of your work at the placement:** In my internship, I worked on my project with the guidance of my supervisor.

**Proposed learning outcomes from the Work Related Learning Activity:**

It is very important that you read the learning agreement guide before filling in this form. You need to list **at least 7 learning** outcomes, and at least **two** learning activity should be closely relevant to the course you are doing at the university.

|  |  |  |  |
| --- | --- | --- | --- |
| **Learning Outcome ID** | **Learning outcomes** | **Activities and tasks** | **Evidence** |
| LO1 | Learn C# to develop simple desktop application | I will be developing a simple management system on C#. | I will be providing the screenshot of the project. |
| LO2 | Design user friendly UI | I will be developing a user friendly UI for the desktop application. | I will be providing the screenshot of the UI. |
| LO3 | Learning Node.js basic and developing simple project | I will be learning and developing simple project on node.js using MySQL database. | I will be providing the screenshot of the project. |
| LO4 | Developing my documentation skills | I will be making project documentation that I have done during the internship. | I will be providing the documentation. |
| LO5 | Developing and Improving presentation skills | I will be presenting the presentation of the project on WRL. | I will be providing the screenshot as well as slides if required. |
| LO6 | Making discussion with our colleagues or seniors | I have been making discussion with my colleagues and seniors in order to solve the problem during the internship. | I will be provide evidence with the discussion with my colleagues. |
| LO7 | Research Skills | I have research on the CRUD in order to get knowledge. | I will provide the URL link or screenshots. |

***This form is approved by WRL academic supervisor***

**Academic Supervisor Name: Ravi Chandra Gurung**

**Academic Supervisor Signature:**

**Date of Signature:**

**If you work at an external company or organization, the following “Heath and Safety checklist” form must be completed before your placement can be approved.**



|  |
| --- |
| **External Work Related Learning (PLACEMENT) PROVIDER**  **HEALTH AND SAFETY CHECKLIST** |

**Name of the Placement Provider (Company name**): Mercantile Office System Pvt. Ltd.

**Placement site Supervisor:** Nilan Joshi

**Supervisor’s Position:** Senior Software Executive

**Address:** Narayanhiti Path, Hitti Pokhari, Kathmandu

**Email:** nilan@mos.com.np

**Telephone:** 9851048306

|  |  |  |  |
| --- | --- | --- | --- |
|  | | Yes | No |
| 1 | Do you have a written Health & Safety policy? |  | ✓ |
| 2 | Do you have a policy regarding health and safety training for people working in your undertaking, including use of vehicles, plant and equipment, and will you provide all necessary health and safety training for the student? |  | ✓ |
| 3 | Is the organisation registered with? (tick as appropriate)  (a) the Health & Safety Executive or  (b) the Local Authority Environmental Health Department |  | ✓ |
| 4 | **Insurance**  (a)Is Employer and Public Liability Insurance which will cover the duration of the placement?  (b) Employer and Public Liability Insurance policy number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (c)Will your insurance cover any liability incurred by a placement student as a result of his/her duties as an employee? |  | ✓ |
| 5 | **Risk Assessment**  (a)Have you carried out any risk assessment of your work practices to identify possible risks whether to your own employees or to others within your undertaking?  (b)Are risk assessments kept under regular review?  (c)Are the results of risk assessment implemented? |  | ✓ |
| 6 | **Accidents and Incidents**  (a)Is there a formal procedure for reporting and recording accidents and incidents in accordance with RIDDOR (Reporting of Injuries, Disease & Dangerous Occurrence Regulations)?  (b)Have you procedures to be followed in the event of serious and imminent danger to people at work in your undertaking?  (c)Will you report to the university all recorded accidents involving placement students?  (d)Will you report to the university any sickness involving placement students which may be attributable to the work. |  | ✓ |

**The above statements are true to the best of my knowledge and belief.**

**Signed on behalf of the company with the company stamp:**

**Name:**

**Signature:**

**Date:**