2026 APPLICATION FOR SCHOOL BASED WORK EXPERIENCE AT TARONGA ZOO SYDNEY

Please complete this Student Placement Record and email a **PDF copy** to Taronga Education at vocedtz@zoo.nsw.gov.au

Cover Page (to be completed by the Careers Advisor)

Student's name _____

Student's email address _____

Grade (in 2026) 10 ☐ 11 ☐ 12 ☐

School name _____

Careers advisor's name _____

Careers advisor's email address _____

Does this student have a medical condition, disability, learning and support need or recognised animal phobia? Yes ☐ No ☐

If yes, please provide more information about this medical condition, disability, support need or phobia.

_____

_____

_____

Does this student have a healthcare plan that can be provided? Yes ☐ No ☐

If yes, please email it as an attachment to vocedtz@zoo.nsw.gov.au with the student's name as the subject.

Can you provide any extra information about the student that might be of assistance to the staff in supporting the student's work experience at Taronga?

_____

_____

Students are allocated a week and an animal division. Please number your student's divisions in order of preference and list two preference weeks. Please note we attempt to place students in their preference week and division, but this is not always possible.

Preference week 1: from _____ to _____

Preference week 2: from _____ to _____

☐ I can attend any week of the NSW Department of Education school terms (tick if applicable)

	Australian Mammals		Reptiles & Amphibians		Australian and Farm Animals		Taronga Wildlife Hospital
	Exotics		Marine		Birds		

Student placement record

The Student Placement Record (SPR) must be completed and signed by the student, host employer, parent or carer and school before workplace learning can start. A completed copy must be provided to the host employer, parent or carer and student. The original is to be held by the school.

Section 1: Student information (Parent to complete if student is under 16 years old)

✓ Work experience

Student's name _____ School _____ Year (eg. 10, 11)_____

Date of birth _____ Student's mobile number _____

Email _____ Medicare number _____

Provide details of **any** medical conditions or medication required eg. severe asthma, type 1 diabetes, epilepsy, anaphylaxis or other severe allergy. _____

Provide details of any support or adjustments to make the placement successful.

_____

Student Declaration

If more space is needed, please attach the information. Student to read and sign declaration.

☐ **I have completed all preparation activities before attending placement. (NSW DoE students only)**

When on workplace learning I will:

- Carry my student safety and emergency contact card
- Inform the school and the host employer if I am unable to attend the placement
- Follow all reasonable directions and will not share host business or personal information with others
- Work safely and only in areas that I am allowed
- Stop work if I feel unsafe and report any issues or accidents to my supervisor and school as soon as possible
- Not use my mobile phone for any reason without permission from the host employer or supervisor
- Contact school or my emergency contact if I feel unsafe or have any concerns.

Student signature _____ Date _____

Section 2: School contact details

School _____ School Email _____

School number _____ Nominated contact _____

Contact position _____ Contact's number _____

The school confirms that:

- The student has been prepared for the workplace prior to the placement and has the appropriate skills and maturity to be safe in a workplace
- Contact during business hours has been provided
- The host employer has been provided a copy of The Workplace Learning Guide for Employers
- Student's parents/carers been provided a copy of The Workplace Learning Guide for Parents and Carers.

(NSW DoE students only for the last 2 points)

Section 3: Host employer details

Host employer Taronga Conservation Society Australia Contact person Work Experience Coordinator
Address Bradley's Head Road, Mosman, NSW 2088 Position Zoo Education Officer

Provide details of workplace learning location if different to the address above or if the student travel is involved

Contact number 02 9932 4842 Mobile 0428 238 555 Email vocedtz@zoo.nsw.gov.au
Website https://taronga.org.au/get-involved/school-work-experience/sydney Type of industry Animal Care
Main activity Zookeeping, animal care Approx. years in current operation 108
Approx. number of employees 600

✓ Tick if you have hosted students for work experience or work placement in the last 12 months

Tick if you require contact from the school ☐ or student ☐ prior to placement commencement.

Supervision and student hours to be worked

Name of experienced supervisor, must not to be a trainee or apprentice Work Experience Coordinator

Position Zoo Education Officer Contact number 02 9932 4842

Start date _____ **Finish date** _____ Total number of days 5 Total hours 37.5

Students start time 8:00am Finish time 3:00pm Breaks approx. 10am & 12pm

Activities and risk management – these sections must be completed

Please provide detailed responses to the following questions. This section details any risks, how they will be managed and assists the school to manage their non delegable duty of care and satisfy your workplace obligations. For more information see: Completion of the student placement record to meet the department's needs.

For a list of activities that students **must not undertake** click on the link: Prohibited activities and activities that need special consideration.

List the activities to be undertaken by the student
Basic animal husbandry, cleaning, food preparation and distribution, observation of tasks or animal training routines, raking, and other general duties such as administrative tasks.

List activities that the student **must not undertake**. This includes no-go areas, specific machinery and equipment that is dangerous for new or young workers. Please note an extensive risk assessment must be completed for horse riding and the use of farm vehicles.
No work with dangerous or hazardous animals, no work near dangerous animals.

List any risks to the student in planned activities, please be specific. This includes manual handling, exposure to sun, chemicals, fumes, repetitive strain injuries and the use of dangerous tools or equipment.
Exposure to sun, slips or trips on steep/uneven paths and walkways, bites or scratches from non-lethal animals, transmission of communicable diseases e.g. Covid-19. See Taronga's Work Experience Risk Assessment for an extensive overview of the risks.

How will the listed risks be eliminated or controlled, e.g. induction on the first day, close supervision, tasks are demonstrated and supervised to completion.
Site-wide induction and division specific induction, close supervision, tasks are demonstrated. See Taronga's Work Experience Risk Assessment for an extensive overview of how the risks will be eliminated.

List special conditions such as clothing, footwear, pre-training, vaccinations or student travel with host employer.
Students must wear closed-in sturdy shoes and appropriate workplace and sun safe clothing. Students may travel in Zoo grounds with host employer in an electric cart or Zoo vehicle. In the rare instance a student will be travelling in a Zoo vehicle, the vehicle and drivers comply with the second dot point in the host employer declaration.

Host employer declaration: Read the following and sign the document. I declare:

- I have read the Workplace Learning Guide for Employers and am aware of my rights and obligations to provide a safe and positive work environment for the student.
- If applicable, the vehicle in which the student is travelling is registered, the driver is licensed for the vehicle they will be driving, and provisional license holders comply with all their conditions.
- I will provide planned learning and skill development activities appropriate for the student under my supervision or a capable and trustworthy employee (not apprentice/trainee) briefed for the task.
- I confirm that the activities assigned are suitable for the student and that WHS risks have been assessed and managed in accordance with the Work Health and Safety Act 2011 (NSW).
- I will check any health care concerns with the student and ensure they and their supervisor know what to do in the case of an emergency i.e. where the student will keep their medication or adrenaline auto- injector-EpiPen.
- I will consult and cooperate with the school and will notify the school immediately of any health and safety incidents involving a student while on placement, including near misses.
- I will ensure that before the student commences their placement, they are provided a site specific workplace induction and then with the appropriate information, instruction, training, supervision (and personal protective equipment where needed) throughout the placement.
- I acknowledge that the student will not be paid during the placement.
- I will notify the school immediately if the student is ill, injured, absent without explanation or behaving inappropriately or I need to change sites or find asbestos on the site.
- I am not aware of anything in the background of any staff member or other person who will have close contact with the student that would preclude that staff member or person from working with children.
- I have informed employees of their obligations when working with children and young people.
- I am aware of the specific restrictions and prohibited activities for students and will ensure students are not asked to carry out any of these activities.I have informed employees of their responsibilities when working with children and young people.
- I will provide the student with access to toilet facilities, drinking water and if required, first aid during the placement.
- I confirm my workplace is following the NSW government guidelines on COVID.
- I agree to all the above statements and will retain this document only for the period of the placement.

Host employer signature Jmountford Date 29/08/2025

Print name Jessica Mountford, Work Experience Coordinator

Privacy notice: The information requested on this form is being collected by the Department of Education (the department). The department will use the information for the following purposes:
(i) Coordinating a workplace learning opportunity for the school student.
(ii) Meet student health, duty of care and child protection responsibilities.
(iii) Support the information needs of the student, host employer and the parent/carer.
Provision of this information is voluntary, however, if you do not provide all or any of the information requested the student may not be able to undertake the planned workplace learning. The department might share the information with a Work Placement Service Provider for the purpose of organising HSC VET work placements but only with the approval of the principal. You have the right to access and correct the information you provide. If you wish to do so, please contact the student's school. Information you provide will be stored securely and kept for a minimum of three years where there is no further action relating to the placement.

Taronga's Confidentiality Agreement – student and parent/carer declaration

Confidentiality of Information

All information gained through your role as a Student concerning the TCSA's operations, business, intellectual property, financial records, and/or employee information, whether obtained directly or indirectly, is to be regarded as confidential. Such information as may be received shall be treated in a strictly professional and confidential manner and not discussed outside the confines of the specific work area, or external to the TCSA.

Release of Information

In your role as a school work experience student, you are not authorised to release information either directly with government or media stakeholders, or via social media. In all instances, requests to release information and/or discuss issues related to the TCSA are to be directed to the Education Manager.

Restrictions on Use of Imagery

The following restrictions apply to photographic images and video material taken at Taronga Zoo and Taronga Western Plains Zoos by TCSA employees and associates (Volunteers, Zoo Friends, School Work Experience and Taronga Training Institute Students).

Specifically, school work experience students may not without prior approval from a supervising staff member, the -Work Experience Coordinator or the Education Manager:
-Take photographs or video of any behind-the-scenes work areas of either zoo without permission/approval.
-Post imagery on networking or other websites (e.g. Instagram, Facebook, LinkedIn etc).
-Publish images and/or videos in any way.
-Send or distribute images and/or videos to any third parties or external agencies.
-Seek to sell or derive a profit from any imagery taken at either zoo.
-Commercially exploit the imagery in any way.

I understand and accept the terms and conditions of this Confidentiality Agreement.

_____	_____	_____
Signature of student	***Date***	***Signature of parent/carer***

Section 4: Parent/carer permission

Name _____ Relationship to student _____

Contact number _____ Work number _____ Contact after business hours _____

☐ **Tick if the placement includes out of normal business hours.** If ticked, please respond to either 1 or 2 below:

1. Years 11-12: I agree to be the contact for the student in the event of an emergency or:

I nominate _____ contact number _____ to be the reliable contact out of normal business hours. Their relationship to my child is _____ and they have accepted full responsibility and consent to their contact details being shared.

2. Years 9 -10: Contact arrangements must be negotiated with the principal by the parent/carer and student. The arrangements are: _____

• I have provided evidence of vaccination compliance as required by host employer. *(For information contact school)*
• I understand that if my young person is diagnosed as being at risk of anaphylaxis I will provide an adrenaline auto-injector for the placement. I consent to my young person's ASCIA Action Plan or individual health care plan being provided to the host employer.
• I understand that I am responsible for any expenses incurred by my young person as a result of accident or injury, prior to a claim submitted and processed under insurance provisions.
• I understand that special approval and additional documentation is required if the placement includes overnight accommodation away from home.
• I have read The Workplace Learning Guide for Parents/Carers and understand my role and responsibilities. I will immediately notify the school if I have any concerns, and the school will follow up.
• I confirm I have read and understand the contents of the Privacy Notice on Page 5.
• I confirm the details listed in the student information section on page 1 are correct if student is under 16 years old.

☐ By signing I consent to the student undertaking the placement outlined on this student placement record.

_____	_____	_____
Signature of parent/carer	***Date***	***Signature of student (if over 18)***

Section 5: School approval of the placement

• The school will report any studentincidentswithin24hours including near misses, in accordance with the department's incident reporting procedures within the Work health and safety policy.
• Proposed activities have been checked, are safe and appropriate to the capabilities of the student.
• Documentation of medical information, vaccinations, support or adjustments will be provided and shared with the host employer. If the student is diagnosed as being at risk of anaphylaxis, the school has confirmed that the parent or carer has provided an adrenaline auto-injector to the student.
• The school has provided a copy of the student's current ASCIA Action Plan or health care plan cover sheet to the host employer as per parent/carers consent (see above).
• General construction induction card (white card) has been sighted where applicable.
• Food handlers basic training certificate or equivalent units of competency to be sighted where applicable.
• Where the placement involves accommodation away from home, relevant documentation is completed and attached.
• The school has contacted the host employer where applicable. See check box page 2.
• Arrangements are in place for a teacher to phone ~~or visit~~ the student and host employer to check on the progress of the placement.

☐ I am satisfied that all the above have been completed and all parts of this student placement record are complete and signed as required and the placement is suitable for this student.

_____	_____	_____	_____
Signature of principal/nominee	***Print name***	***Date***	***Nominee position in school***

Working Directly with Animals

Student and Youth Declaration

About this declaration

Taronga has obligations under the Exhibited Animals Protection Act 1986 to protect the welfare of animals in our care. Taronga is mandated to require people who work with, or care for animals to declare if they have convictions or charges for 'relevant offences'.

'Relevant offences' are offences under:

* Exhibited Animals Protection Act 1986 and Regulations, in relation to an animal
* Crimes Act 1900 - section 79, 80, 530 or 531
* Prevention of Cruelty to Animals Act 1979 and Regulations, in relation to an animal

As a person who works directly with, or cares for animals at Taronga, you are required to complete this declaration.

Privacy Statement

Taronga uses the personal information collected in this form to carry out employment/engagement screening functions in accordance with section 31A of the Exhibited Animals Protection Act 1986 (EAPA). Taronga stores all information in secure systems and does not disclose information to others, except as permitted by law. You have a right to seek access to, and correct your personal information held by Taronga. See Taronga's Privacy Management Plan for further information. The Privacy Officer can be contacted on email at privacy@zoo.nsw.gov.au

Declaration (Student to Complete)

Full name of student:

_____

Date of birth:

_____

I am engaging with Taronga as a:

➢ School Work Experience Placement

1. Does the person named above have a conviction for a relevant offence (see definition above)? Please tick one.

- ☐ Yes, I have a conviction for a relevant offence
- ☐ No, I declare I do not have a conviction for a relevant offence

2. Has the person named above been charged with a relevant offence? Please tick one

- ☐ Yes, I have been charged with a relevant offence
- ☐ No, I declare I have not been charged with a relevant offence

Note: A declaration for a relevant offence is not required if the charge has been withdrawn, discontinued or heard and determined by a Court.

Signature and Date:

_____

Working Directly with Animals

Student and Youth Declaration

If the person completing this declaration is under 18 years old, parental consent and co-signing is required. Please complete the section below:

Full Name of parent/caregiver:

_____

Relationship to person completing declaration:

_____

Contact phone number:

_____

Signature and Date:

_____

Taronga must be notified within seven days if a charge or conviction for a relevant offence is made.

By signing this form, I declare that I have read and understood this form, and that the information provided within it is true and correct.