Application For Work Experience Taronga Western Plains Zoo 2021 Supplementary Form

Electronic correspondence will be the main channel of communication, so please ensure ALL email addresses are correct and legible. To avoid Taronga Western Plains Zoo emails ending up in SPAM or JUNK mail, please add us as a trusted sender.



| Student Details | |
|--|---|
| Student Name: | Email: |
| Student Mobile: | |
| Grade (2021) - 10 🗆 Yr11 🗆 Yr12 🗆 | □ Male □ Female □ Other |
| Does the student identify as an Aboriginal and/or Torr | res Strait Islander person? \Box Yes \Box No \Box Prefer not to answ |
| Does the student have a medical condition, disability on \square Yes \square | 0 11 |
| | (please specify) |
| NB: For students with a recognised phobia, please inc | dicate the animals that you wish to avoid: |
| Careers Adviser Details | |
| Careers Adviser Name: | Email: |
| Please tick if you would like to be kept up to date with | Zoo Education newsletters and current events \Box |
| Careers Adviser Contact Number: | |
| School Details | |
| School Name: | Phone: |
| School type: NSW Department of Education \Box | Catholic Systemic Independent/AIS |
| Placement Date Options Schools must endorse the dates selected, as date preferences below OR tick the box if you are available | es cannot be changed once allocated. Nominate your date able any week during school terms. |
| Week 1: From | toOR |
| Week 2: From | toOR |
| □ I can attend any time during NSW Department | t of Education term dates |
| □ (Student) I have NOT previously completed work e | experience at either Taronga Sydney or Western Plains Zoo |
| Signed: | |
| (Student) | (Date) |

□ (Careers Advisor) I understand that only <u>ONE</u> student from my school may be selected for a work experience position at TARONGA WESTERN PLAINS ZOO. I understand that this application does not automatically confirm a placement for my student. The student and I will be notified in due course via email as to whether the application has been successful. I undertake to supply a Certificate of Currency evidencing current personal accident and public liability cover for the applicant student at least one week prior to the placement commencing (not required for NSW DOE Schools).

Career Adviser Signed: _____

Date of application:

Closing date: Friday 11th December 2020.

Please **POST** completed application form to: Taronga Western Plains Zoo – Education Centre PO Box 831 Dubbo NSW 2830

Privacy Notice: Personal and sensitive information provided in this form and in relation to the student placement will be treated in accordance with Taronga's Privacy Statement see: <u>https://taronga.org.au/about/privacy</u>



Student placement record

The student placement record 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

| □ HSC VET work placement | VET course name | | |
|--------------------------------|---|---|--|
| Work experience | Accommodation away from home is required. | | |
| School: | | | |
| Student's name: | | Date of birth: | |
| School Year (at time of placer | ment): | Medicare number: | |
| Student's mobile number: | | _ Email: | |
| | | ation nonvinced on a covere actions type 4 disbates | |

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

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

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

□ I have completed all preparation activities before attending placement.

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
- Contact school or my emergency contact if I feel unsafe or have any concerns.

| Student signature: | Date: | |
|--------------------|-------|--|
| 5 | | |

Section 2: School details

| School | Address |
|--------------------|-------------------|
| Nominated contact: | Contact position: |
| Contact number: | Contact email: |

The school undertakes to ensure that:

- the student has been prepared for the workplace prior to the placement
- · 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 have been provided a copy of The Workplace Learning Guide for Parents and Carers.

Section 3: Host employer details

If more space is needed please attach the information.

Host Business: Taronga Conservation Society Australia - Taronga Western Plains Zoo

Address: Obley Road, Dubbo NSW 2830

Provide details of workplace learning location if different to the address above

| Contact person: Work Experience Coordinato | r Position: <u>Senior Education Officer</u> | | |
|---|---|--|--|
| Contact Number: 02 6881 1433 | lobile: <u>N/A</u> | | |
| Email: twpzeducation@zoo.nsw.gov.au | Website: www.taronga.org.au/dubbo-zoo | | |
| Type of industry: <u>Animal Care</u> Main activ | vity: Zoo Keeping, Animal Care | | |
| Approx. years in current operation: <u>44</u> Approx. number of employees: <u>150</u> . | | | |

 $\sqrt{1}$ 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

Name of experienced supervisor, must not to be a trainee or apprentice: Senior Education Officer

| Position: Work Experience Coordinator Contact number: 02 6881 1433 | | | | |
|--|---------------------------|--------------------|-------------------|---------------------------|
| Start date: | Finish date: | Total number of | of days: <u>5</u> | Total hours: 37.5 |
| Students start time: 8am | Finish time: <u>3-4pm</u> | Break: <u>12pm</u> | f one day per | week list day: <u>N/A</u> |
| For split shifts: Shift 1 star | rt time: finish time | e: Shift 2 | start time: | finish time: |

Activities and risk management

Please note: These sections cannot be left blank

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 duty of care and satisfy your workplace obligations. For more information see: <u>Completion of the student placement record to meet the department's standards</u>.

For a list of activities that students are **not to undertake** select the link: <u>Prohibited activities and</u> <u>activities that need special consideration</u>

List the activities to be undertaken by the student: <u>Site induction on first day, COVID Safe induction, animal care, food preparation, cleaning enclosures,</u> <u>raking, shovelling and other general duties</u>

List activities that the student is **not to 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 near or with dangerous animals. No touching surfaces or equipment without sanitising hands first, no working on grounds without a facemask, no working in situations where the 1.5m social distancing rule cannot be adhered to.

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, seasonal weather conditions i.e. sever heat, wind, rain. Slips, trips or falls on steep paths and uneven walkways. Bites or scratches from non-lethal animals, transmission of communicable diseases e.g. Covid-19

How will the listed risks be eliminated or controlled, e.g. WHS induction first day, close supervision. <u>Providing a WHS general induction and safety briefing, including COVID-safe induction on first day of</u> <u>placement as well as divisional specific orientation</u>

List any special conditions such as clothing, footwear, pre-training, vaccinations or transport.

Students must wear name badges (supplied), closed in, sturdy shoes, appropriate clothing (short must be knee length), sun protection and a face mask. A small back-pack to carry water bottle and personal effects on site.

Student: School: Host Business: Taronga Conservation Society Australia – Taronga Western Plains Zoo, Dubbo

Host employer to read the following declaration and sign the document.

- I have read the <u>Workplace Learning Guide for Employers</u> and am aware of my rights and responsibilities and the need to provide a safe and positive work environment for the student.
- I will provide planned learning and skill development activities appropriate for the student under the supervision of myself 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 see that the student is first provided with 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 and will notify the school if the student is ill, injured, absent without explanation or behaving inappropriately.
- I will notify the school immediately if 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 will provide access to first aid, toilet facilities and drinking water.
- I have informed employees of their responsibilities 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 agree to all the above statements.
- By signing this section you are confirming your workplace is following NSW Health COVID-19 safe guidelines, including a COVID-19 safety plan (or relevant state or territory COVID safety plans).

Host employer signature:

Date: 16/10/2020

Print name: Stephanie Maguire

Privacy notice - for all parties

The information provided by students, parents/carers and host employers is obtained for the purpose of coordinating a workplace learning opportunity for the school student. The NSW Department of Education will use the information to meet student health, duty of care and child protection responsibilities and to support the information needs of the student, host employer and the parent/caregiver. The Work Placement Service Provider might access information related to HSC VET work placements but only with the approval of the principal. Providing this information is voluntary. However, if you do not provide any of the information requested then the

Student:School:Host Business:Taronga Conservation Society Australia – Taronga Western Plains Zoo, Dubbo

student may not be able to undertake the planned workplace learning. The information you provide will be stored securely and kept for a minimum of two years where there is no further action relating to the placement. The information will only be disclosed for purposes directly related to the purpose for which it is collected. You may correct any personal information by contacting the student's school.

Section 4: Parent/carer permission

| Name: | | Relationship to student: | |
|-----------------|---------|--------------------------|--|
| | | • | |
| Contact number: | Mobile: | Work phone | |

Contact after normal 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 _____

business hours. Their relationship to my child is ______ and they have accepted this responsibility.

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 if the student is diagnosed as being at risk of anaphylaxis, I will provide an adrenaline auto-injector for the student for the placement.

The student has a current ASCIA Action Plan or individual health care plan and I consent to a copy

being provided by the school to host employer eg. health care plan or cover sheet.

The placement includes **overnight accommodation away from home.** I understand this will need special approval and additional documentation.

I have read <u>The Workplace Learning Guide for Parents/Carers</u> and understand my role and responsibilities.

I will immediately notify the school if I have any concerns and the school will follow up.

I am aware of the contents of the Privacy Notice on Page 1.

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 student incidents within 24 hours including near misses, in accordance with the Incident Reporting Policy and Procedures.
- 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.

Student:

School:

Host Business: Taronga Conservation Society Australia – Taronga Western Plains Zoo, Dubbo

- 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 or 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 principle/nominee

Date

Print name

Nominee position in school

Work Experience Selection Criteria

Below are five questions which required to be answered **by students** as part of our selection process.

Are you studying any subjects or courses that have a focus on animals. If yes please specify.

List any extracurricular activities or volunteering opportunities that you undertake Eg - Team Sports, debating public speaking, SRC, environment club, Duke of Edinburgh, soup kitchen, Youth at the Zoo

Describe your future career aspirations in the animal industry.

Describe the work ethic and communication skills you have acquired through school, part time work, volunteering or other work experience.

Describe the experience you have caring for animals.