

# Accommodation away from home

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This original form and any attachments are to be retained by the school and EVET provider (where relevant) and copies provided to the student, parent/carer and host employer.

## Section A: Placement details

Student name: School year:  
Placement dates: School/EVET provider:  
Host employer: Address:  
Contact number:

## Section B: Accommodation information

Accommodation arranged by: Parent/ carer      School/EVET provider      Host employer

Type of accommodation: Private home      Motel/hotel      Dormitory      Other\*

Accommodation is with: Family      Other

Travel between workplace and accommodation: Private car      Public transport      Other

\*If the adult responsible for supervising the student's accommodation is not a member of the student's family, additional documentation will need to be completed. The department's Working With Children Check Declaration for volunteers and contractors ([Appendix 5](#)) and Proof of Identity ([Appendix 6](#)) must be completed and provided to the school/EVET provider before the placement is approved.

Accommodation address:

Name of adult supervising student at the overnight accommodation:

Relationship to student: Contact number:

## Declaration by parent/carer.

Parent/carer name:

- I have spoken with the adult responsible for supervising my child at the overnight accommodation. I understand that a non-family adult supervisor will need to complete the declaration and provide certified proof of identity, as specified in Section B above, to the school/EVET provider before the placement can be approved.
- I am satisfied with the supervision arrangements.
- I approve of the overnight accommodation, travel arrangements and out-of-hour activities.

- I understand that the insurance and indemnity provisions:
  - apply to daily travel to and from the workplace
  - apply to activities undertaken under the supervision of the employer during working hours
  - only apply to overnight accommodation which is provided and supervised by the employer as a normal provision of that type of employment.

**Parent signature:**

**Date:**

## Section C: To be completed when host employer provides onsite accommodation

The school/EVET provider appreciates you volunteering to provide accommodation onsite for the student(s) undertaking workplace learning away from home. The placement provides exceptional educational outcomes that the student(s) might otherwise have not been able to access.

The NSW Department of Education has policies and procedures related to child protection. The essential information about working with children and young people provided in the department's The Workplace Learning Guide for Employers also applies to the provision of onsite overnight accommodation.

EVET providers are responsible for ensuring that mandatory NSW Department of Education requirements are met, including the activities to be undertaken, duty of care, child protection and incident reporting.

We trust that hosting the student at your site will be mutually beneficial and anticipate that the student will benefit greatly from the experience of undertaking workplace learning with your enterprise.

### Declaration by host employer/accommodation supervisor.

Accommodation address:

Is the accommodation at the host employers home: Yes                      No

Phone number/s at the accommodation: Phone                      Mobile

Accommodation will be supervised by: Host employer                      Employee

Relationship of accommodation supervisor: Family                      Not family\*

Overnight, the accommodation supervisor will be located at:

Is this nearby to the student: Yes                      No

I/we agree to provide safe and secure accommodation for the student and ensure that the student is not exposed to harm.

I/we am not aware of anything in the background of any staff member at this accommodation that would preclude our hosting the student during this placement.

As the host employer, I will make all employees at the accommodation aware of the above undertaking to ensure that the student is not exposed to harm.

\*Please ensure that appendix 5 and 6 are completed and provided to the school.

Host employer signature:

Date:

Print name:

Accommodation supervisor signature:

Date:

Print name:

Position:

## Section D: To be completed by the school/EVET provider

Outline the reasons the placement requires accommodation away from home eg. lack of opportunity in the local community, exceptional opportunity.

### Declaration and approval by school/EVET provider.

The student has completed suitable preparatory activities including strategies for keeping themselves safe and emergency contact arrangements.

The student has been issued with an Emergency Contact Card and trained how to use it.

I have contacted the parent/carer and discussed accommodation, transport and supervision arrangements.

I have discussed accommodation and supervision arrangements with the host employer/supervisor in cases where this is provided onsite where relevant.

Completed Appendices 5 and 6 have been reviewed by the school/EVET provider prior to placement approval.

The following **documents** are attached:

- Student placement record
- Record of parent/carer discussion
- Duty of care checklist for principals/EVET provider managers
- Appendix 5 and 6
- Onsite accommodation assessment form
- Summary of student's out-of-hours activities.

The placement as documented on the attached student placement record and the accommodation arrangements are approved.

Name:

Position:

School/EVET provider:

Signature:

Date:

For EVET provider arranged placements the school principal is required to acknowledge and approve the arrangements.

Name:

Signature:

School:

Date: