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**Tracking sheet – Experiencing the World of Work**

The aim of the unit is for the learner to develop their skills in, and understanding of, the workplace by preparing for, attending and reviewing a work experience placement. It is also an opportunity for learners to obtain a work reference which they may find useful in the future. Increasingly there is more and more research demonstrating how important work experience is in helping learners move into paid employment.

While completing this unit learners will consider what they will gain by undertaking a work experience placement, how they can best prepare for that experience, and what they gained by completing it.

**Level 1**

**Learner name Centre name**

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| **To do this you must** | **Evidence location** |
| 1. Be able to plan for work experience | |
| * 1. State where you will be going on work experience |  |
| * 1. State skills you hope to gain on your work experience |  |
| * 1. Plan own journey to ensure you arrive on time at your work experience |  |
| 1. Be able to complete a successful work experience placement | |
| * 1. Complete a daily log about your work experience, covering tasks undertaken |  |
| * 1. Give examples of how you worked co-operatively with others |  |
| * 1. Give examples of how you adhered to health and safety in the workplace |  |
| * 1. Obtain feedback on your placement e.g. reliability, attitude to work, and communication skills |  |
| 1. Be able to review your work experience placement | |
| * 1. Give examples of what you enjoyed about your work experience |  |
| * 1. Give examples of aspects of your work experience that you found difficult/challenging |  |
| * 1. State skills developed on your work experience |  |
| * 1. State how this work experience will help you in the future |  |
| **Assessor feedback** | |
|  | |
| **Assessor declaration** I confirm that the details above are correct, that the evidence submitted is the learner’s own work and that the learner meets all the requirements for the unit: | |
| Learner Name Assessor Name  Learner Signature Assessor Signature  Date Date | |