

**Tracking sheet –** Work Experience

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 think about 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.

**Entry 3**

**Learner name**  **Centre name**

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| **To do this you must** | **Page number** | **Assessment date** |
| 1. Understand the value of work experience | | |
| * 1. Identify the benefits of attending a placement |  |  |
| 1. Be able to plan for a safe work experience | | |
| * 1. State where you will be going on work experience |  |  |
| * 1. Identify skills you hope to gain on your work experience |  |  |
| 2.3 Plan how to get to your work experience |  |  |
| 2.4 Identify who to report to when on work experience |  |  |
| 1. Be able to complete a safe work experience placement | | |
| 3.1 Identify where health and safety information can be found at your work experience |  |  |
| 3.2 Arrive on time |  |  |
| 3.3 Give examples of what you did during your work experience |  |  |
| 3.4 Follow instructions to complete tasks safely in the work place |  |  |
| 3.5 Communicate appropriately with others in the workplace |  |  |
| 1. Be able to review your work experience placement | | |
| 4.1 Identify what you enjoyed about your work experience |  |  |
| 4.2 Give an example of something that could have improved your work experience |  |  |
| **Assessor feedback** | | |
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| **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 | | |