



SWINBURNE
UNIVERSITY OF
TECHNOLOGY

Careers and Employment Student Off-campus Work Safety Compliance Induction Form Voluntary Student Work Placements



STUDENT COPY – For insurance coverage it is vital to return completed form to Careers and Employment

Print your details clearly

Today's date		Student ID	
Name			
Faculty			
Course		Year of Course	
Are you an international student?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Postgraduate <input type="checkbox"/> Undergraduate		
Address			
Suburb		Postcode	
Telephone			
University Email Account			
Please provide the emergency contact details of at least one friend or relative			
Name			
Telephone business hours		After hours	Mobile

PLEASE PROVIDE DETAILS OF YOUR SELECTED PLACEMENT

Name of Organisation and Contact Person	
Address	
Telephone	

Conditions for student

Only students currently enrolled at the University are covered by the University's Insurance Policy. The University's insurance only covers student volunteer placements which are clearly identified as relevant to a student's course of study. If a volunteer project does not seem to match this criteria students will not be covered by the University's insurance. In these circumstances the onus is on the student to establish that the organisation has appropriate public liability and volunteer insurance.

This induction form will become effective upon receipt by Careers and Employment of your host employer's satisfactorily completed Safety Agreement form.

Your host organisation will be asked to give an undertaking that it complies with existing Occupational Health and Safety legal requirements and standards.

Your host organisation will be required to put you through an induction session that informs you of potential hazards to your health and the relevant safe working procedures.

You agree to comply with the rules and obligations that apply to volunteers/employees (whichever applies to you) whilst on the premises of your host organisation and when representing your host organisation to third parties.

You agree to comply with any confidentiality obligations required by your host organisation including signing any necessary forms.

You are covered by the University's student personal accident insurance in the case of an accident or injury while at the work placement.

CONTACT YOUR WORKPLACE CO-ORDINATOR

1. In the case of any confusion, disagreements or difficulties with other employees/personnel from the host organisation.
2. In the case of any situation which causes undue hardship during your placement.

CONTACT EMMA O'CONNELL, YOUR SWINBURNE UNIVERSITY CO-ORDINATOR

1. In the case of accident or injury occurring in the workplace, you must notify Emma O'Connell as well as your workplace co-ordinator at the host organisation.
2. If any unresolved disputes or hardships occur in the workplace.

EMERGENCY CONTACT NUMBERS

Police, Fire, Ambulance	000
Poisons Information	13 11 26
Police Search & Rescue Squad	03 9537 1006
Swinburne University Security	03 9214 8176

PLEASE SIGN AND DATE THE FORM

I have read and will comply with the notifications on this form.

Student's signature

Date

PLEASE RETURN COMPLETED FORM TO CAREERS AND EMPLOYMENT

Fax	9214 8447
Post	PO Box 218 Hawthorn 3122
In Person	Ground floor, West Building, 20 Wakefield Street, Hawthorn