



St PATRICK'S

Technical College

2-6 Hooke Road Edinburgh North South Australia 5113
PO Box 65 Edinburgh North South Australia 5113

Tel: 1300 765 384 Fax: 08 8209 3777

Web: www.stpatstech.sa.edu.au
Email: enquiries@stpatstech.sa.edu.au

Name: _____

Mentor Group: _____

Work Experience Dates: _____

WORK EXPERIENCE JOURNAL 2013

(Work Education Assessment Task)

CONSIDERATIONS

It is important that you show that you can be an asset to the workplace.

Make sure you consistently display the following characteristics:

- ✓ Be punctual - arrive before time, keep to break times
 - ✓ Be attentive to instructions - listen carefully and do exactly what is asked of you
 - ✓ Maintain professional appearance - ensure you meet organisational guidelines/expectations, maintain your grooming throughout the day
 - ✓ Be polite - be considerate and courteous at all times
 - ✓ Be prepared - make sure your notes are well organised and available for referral
 - ✓ Learn what you can
 - ✓ Observe - watch and listen
 - ✓ Practise and improve
 - ✓ Ask questions
 - ✓ Learn from your mistakes - accept criticism and improve
 - ✓ Expect to complete some ordinary tasks including tea/coffee making, cleaning, messages etc. - do them to the best of your ability
 - ✓ Consult with your supervisor at the start of each day to discuss tasks for the day
 - ✓ Make sure you understand exactly what you have to do - don't be afraid to ask questions and repeat the task to your supervisor to clarify when necessary
 - ✓ Do not rush tasks - make sure they are completed properly and be sure you follow safe work practices
 - ✓ Offer to help when you can see the need e.g. answer the phone, tidy brochures, grab a broom, tidy materials and tools
 - ✓ Complete your Work Experience log each day:
 - Complete at the start/end of each day
 - Add/change when necessary during the day
 - Consult with Work Placement staff about areas for improvement
 - Be honest in your self-evaluation comments
- Remember:** This is not just a list of tasks performed but a critical reflection of your experiences and performance

IMPORTANT POINTS TO CONSIDER

- ✓ If you are unable to attend the workplace at any time you must **immediately** contact your (1) work placement supervisor and (2) The College office to explain your absence
- ✓ You must make an **appointment** with your Work **Supervisor** for your last day so that your Student Daily Log booklet can be completed
- ✓ Please thank the Employer and your supervisor for your WORK EXPERIENCE LEARNING. This will leave a lasting and very positive impression
- ✓ As soon as you start your WORK EXPERIENCE LEARNING; show your Employer/Supervisor the information for the Employer/Supervisor on page 2 of this Log Book

INFORMATION FOR THE EMPLOYER/SUPERVISOR

Thank you for providing a Work Experience Learning placement.

Could you ensure the following occur:

- ✓ *Workplace Induction/Orientation*
 - This section is to be completed by you, the employer/supervisor. It serves to verify that the student has been given site-specific information relating to the Occupational Health and Safety issues relevant to your particular workplace.
- ✓ *Daily Time Sheet*
 - Please sign this record to verify that the information is true and correct
- ✓ *Daily Activities*
 - Please sign this record to verify that the information is true and correct
- ✓ *Work Experience Evaluation Form*
 - Please complete and sign this form

WORKPLACE INDUCTION / ORIENTATION

Please tick as completed

- Basic understanding of the activities undertaken by the organisation.
- Basic understanding of the management structure of the organisation.
- Understanding of the work behaviour requirements and expectations.
- Understanding of the required dress standard applicable to the job and workplace.
- Knowledge of the safety requirements applicable to the job and workplace.
- Knowledge of applicable procedures in case of accidents and emergencies.
- Location of facilities, toilets, change rooms, exits as applicable.
- Knowledge of start/finish times, work break times, work routines.
- Knowledge of the procedures to follow and the person to notify in the event of non-attendance.
- Introduction to people with whom the student will be working directly.
- Knowledge of the person to consult in the event of problems occurring.

Name of Organisation: _____

Supervisor's Name: _____

Supervisor's Signature: _____

Date: _____

DAILY TIME SHEET

Date	Start AM	Finish AM	Lunch	Start PM	Finish PM	Total Hours	Supervisor's Initials
Monday _____							
Tuesday _____							
Wednesday _____							
Thursday _____							
Friday _____							

Supervisor's
Signature: _____

Date: _____

DAILY LOG

Monday _____

Task	Description

What were the main challenges and why?

What was the most enjoyable experience and why?

What examples of team work have you seen occur today?

Supervisor's
Signature: _____

Date: _____

DAILY LOG

Tuesday _____

Task	Description

What were the main challenges and why?

What was the most enjoyable experience and why?

What examples of team work have you seen occur today?

Supervisor's
Signature: _____

Date: _____

DAILY LOG

Wednesday _____

Task	Description

What were the main challenges and why?

What was the most enjoyable experience and why?

What examples of team work have you seen occur today?

Supervisor's
Signature: _____

Date: _____

DAILY LOG

Thursday _____

Task	Description

What were the main challenges and why?

What was the most enjoyable experience and why?

What examples of team work have you seen occur today?

Supervisor's
Signature: _____

Date: _____

DAILY LOG

Friday _____

Task	Description

What were the main challenges and why?

What was the most enjoyable experience and why?

What examples of team work have you seen occur today?

Supervisor's
Signature: _____

Date: _____

Rate your performance in the following areas of self-management over the last week:

Punctuality	0							5
Enthusiasm	0							5
Reliability	0							5
Motivation	0							5
Common Sense	0							5

STUDENT REFLECTIONS

- ✓ Can you see any connection between college and getting the job: e.g. required subjects and grades? (Explain)

- ✓ List what other skills you would need for this job?

- ✓ What safety regulations does the firm have in regard to clothing, footwear and personal appearance?

- ✓ Does a safety program exist? eg. signs, posters, lecture etc. (Explain)

✓ Is there a work place injury reporting process? (Explain)

✓ What safety rules must you follow if using any equipment?

✓ Does all equipment have SOP's?

✓ What other different occupations exist in the firm?

✓ Would any of these interest you? If yes, which ones:

✓ How would you find out about vacancies in this firm?

✓ What are your chances of getting a job in this area?

✓ Are there any promotions available?

TICK YOUR WORKING CONDITIONS

- Indoor
- Outdoor
- Quiet

- Noisy
- Clean
- Air Conditioned

- Dirty
- Smokey
- Lunch Room

WHAT I LIKED ABOUT THIS JOB

Think about things like start and finish time, general duties, pay rates, other staff, the town, working with people or being independent etc.

1. _____
2. _____
3. _____
4. _____

WHAT I DIDN'T LIKE ABOUT THIS JOB

Cleaning, watching others work, type of work etc.

1. _____
2. _____
3. _____
4. _____

WORK EXPERIENCE DEBRIEFING (to be completed by student)

1. Was the time on work placement long enough? Yes No
2. Was the time on work placement too long: Yes No
3. Has the experience been useful? Yes No

(explain)

4. Were you able to find out things you wanted to know about the job? Yes No

(explain)

5. Were you able to do the work given to you? Yes No

(explain)

6. Was the work you did interesting? Yes No

(explain)

7. Did you feel safe in the workplace? Yes No

(explain)

8. What would have made the experience a better one?

9. Would you like to do this job permanently?

(explain)

10. Have you changed your mind about your Apprenticeship preference?

(explain)

11. Are you surer now of the career you want and the course you want to do in the future?

Yes No

12. General Comments

13. What have you learnt about you as a result of your work experience?

Student's Signature: _____ Date: _____

Parent's Signature: _____ Date: _____

Please return this completed journal to your Mentor Teacher for Assessment