

KINGS'

SCHOOL · WINCHESTER

Work Experience Health & Safety Disclaimer Form

Monday 13 - Wednesday 22 July 2026 (excluding 18/19)

Student Name:	Tutor Group:
 I confirm that I have agreed to my child participating in a with agreed period of time I confirm that they are medically fit to undertake the placer I confirm that I will be responsible for their wellbeing whilst will be made or agreed I have satisfied myself that the placement is a safe enviex experience I understand that Kings' School will do their best to ensure are completed for any placements that are within Hampshii If a placement falls outside of the Hampshire boundary of check will not be carried out prior to placement. Para responsibility that it is a safe environment for undertaking with a confirm that in the hopefully, unlikely event of an accident Kings' School is not to be held liable or responsible for my contact details will be given to parents and employers near 	ment on placement and travel arrangements ronment for them to undertake work that relevant health and safety checks re r with a parent/family member then a ents/guardians will need to take full work experience t or similar occurring during placement, hild evailable at all times during placement.
Further information Pupils cannot be paid for Work Experience, although employers ma costs or provide refreshments.	y choose to pay for additional transport
Hours must be 'reasonable'. Hours will vary depending on the employay for that particular position. Hours should generally be betwee 'unsocial'.	
Regardless of whether a health and safety check has been carried of Kings' School will ensure that a current Employer's Liability Insuranthis.	·
Phone calls and, in exceptional circumstances, visits will be made Placements to check that the experience is working well.	de to the employers during the Work
Signed (parent/carer): Na	ame:

Please return to Mrs J Turner, Work Experience Co-ordinator by Friday 27 February 2026 i.turner@kings-winchester.hants.sch.uk

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Date: