Are you ready for Workplace Learning?

Prior to commencing your workplace learning you should complete work ready activities at your school, TAFE or Private or Community RTO.

Think about work health and safety while you are learning and working

- Participate in a work site induction. Ask for information, instruction, training and on-going supervision when undertaking an activity, especially where you are asked to undertake an unfamiliar activity, or an activity in unfamiliar surroundings.
- Keep yourself safe and don’t do anything to jeopardise the safety of others.
- Tell your supervisor if you have any safety concerns. Concerns about safety while in the workplace are always legitimate and always need to be addressed to your satisfaction.
- If in doubt ring your nominated teacher contact. A concern might need to be followed up by your school or TAFE.

For Medical Staff

- Do not treat this injury as a Workers Compensation claim as the student is not a paid employee.
- Do not issue a WorkCover NSW - certificate of capacity.
- Please issue invoices in the name of the student (not the school).

For HSC VET work placement students
see www.go2workplacement.com
## If you are injured in the workplace

- Seek first aid or medical help immediately.
- Contact your school, TAFE teacher or P/C RTO and tell your parent.
- If out of hours, contact your emergency contact e.g. parent.
- If you see a doctor, you must use your Medicare number. This will not be a Workers Compensation claim. Ask for a medical certificate, not a certificate of capacity (4 pages). Ask that any medical invoices be made out in your name, not to the school.
- Within 24 hrs, write a report of the incident as your teacher will need to know these details. They will follow this up and report the incident where needed.

### My nominated teacher contact during normal business hours:
*(for example 9am - 5pm)*

<table>
<thead>
<tr>
<th>Name:</th>
<th>Telephone:</th>
<th>School, TAFE, P/C RTO:</th>
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### For an emergency out of normal business hours:

<table>
<thead>
<tr>
<th>My parent or nominated contact:</th>
<th>Telephone:</th>
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### My Medicare No:

Any known allergies or medical conditions?