



2008 NEA Work Experience Disclosure Form



Student Registration

Please insert your details below

Name:

Student Number:

Postal address:

.....Post Code:

Tel (H):

(Mob/W):

Email:

Current Course Title:

Completion Semester:

Year:

Employer Registration

Please insert your details below

Name:

Position:

Company Name:

Postal Address:

.....Post Code:

Tel (W):

Fax:

Mob:

Email:

Are you a past student of UNE? Yes No

Placement Details

Placement Period:/...../..... to...../...../.....(within the calendar year of 2007)

Approximate number of hours:

Position Title:

General Duties to be performed by student:

Conditions

This scheme is available to UNE students who wish to obtain New England Award points for voluntary or paid work carried out while a student at UNE. The following conditions must be adhered to:

- The student must be currently enrolled,
- The student must obtain their own work placement,
- The work must be approved by the UNE New England Award Office as being eligible for New England Award points prior to starting,
- The employer must formally agree to supervise the student on-site,
- The student must read the information on the back of this form about workplace safety,
- Both the student and employer need to sign the registration form and a copy is to be provided to the New England Award Office at UNE and the employer prior to the commencement of the work.

Agreement

Student

I understand and agree with the above conditions of NEA work experience.

Signature:

Employer

I understand and agree with the above conditions of NEA work experience.

Signature:

UNE New England Award Office

I certify that the work experience is eligible for NEA points.

Signature:

Insurance Cover for the NEA Work Experience

The University of New England holds public liability and personal accident insurance for NEA work experience students who have completed this disclosure form. Details can be obtained from our website at www.une.edu.au/finance/forms.htm