


## WORK EXPERIENCE CONTRACT

	EUROPASKOLEN - EUROPÄISCHE SCHULE - ΕΥΡΩΠΑΙΚΟ ΣΧΟΛΕΙΟ - EUROPEAN SCHOOL - ESCUELA EUROPEA - ECOLE EUROPEENNE - SCUOLA EUROPEA - EUROPESE SCHOOL - ESCOLA EUROPEIA - EUROOPPA KOULU - EUROPASKOLAN
	<b>WORK EXPERIENCE CONTRACT</b>

Between the undersigned:

<b>The Employer:</b>	
Address:	
	Tel:
Field of activity:	
Represented by	
Position held	

<p style="text-align: center;"><b>Mr Brian Goggins</b> <b>Director of the European School Brussel I</b> Avenue du Vert Chasseur, 46 1080 – Uccle ( Brussels ) - Belgium Telephone: + 32 ( 0 ) 2 373 86 11</p>
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<b>Student's Full Name</b>	
Address:	
Student at the above school in Secondary class __ S5 __ Section _____	

( If a minor ) the Student is represented by  ( Full name, place and date of birth, type of relationship with the adult responsible )
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## WORK EXPERIENCE CONTRACT



It is agreed as follows:

### **Article 1**

The Employer will provide a work-experience placement for the above student, currently enrolled at the European School of Brussels I.

### **Article 2**

The Employer will take into consideration the educational needs of the student when assigning tasks to *him/her*.

The Employer accepts that in its relationship with the student it stands *in loco parentis* ( that is, it has a *duty of reasonable care* ) for the duration of the placement.

### **Article 3**

The placement will last from **Monday** \_\_\_ / \_\_\_ / \_\_\_ **to Friday** \_\_\_ / \_\_\_ / \_\_\_ **inclusive**.

Normal working hours begin at h. \_\_\_\_\_ and end at h. \_\_\_\_\_.

### **Article 4**

The placement supervisor ( i.e., contact person ) within the Employer is:

**Mr/Mrs** \_\_\_\_\_

**Position held** \_\_\_\_\_

The supervisor will be responsible in due course for producing a written evaluation of the Work Experience.

### **Article 5**

The Work Experience Coordinator for the School is Mrs Karina Huayamave.

### **Article 6**

The Employer undertakes to inform the School of any absence of the student, or of any other problem which may arise during the placement.

## WORK EXPERIENCE CONTRACT



### **Article 7**

Reciprocally, the WE School Coordinator will inform the Employer of any relevant problem of which the latter might otherwise be unaware.

### **Article 8**

For the purposes of this contract, the Student, during *his/her* placement, remains a member of the School at which *he/she* is enrolled.

No contract of employment exists between him/her and the Employer.

This situation has the following consequences:

- being a full-time student, *he/she* is entitled to receive no remuneration for *his/her* services.
- for the duration of the placement, *he/she* continues to be covered by the terms of the School's insurance policy.

The Employer will take out an insurance policy covering its responsibility.

### **Article 9**

The Employer will cover any expenses incurred in the workplace by the student at its official instigation.

### **Article 10**

The Employer is required to notify the School and/or the relevant health authorities of any medical problem that comes to its attention during the period of the student's presence.

### **Article 11**

The student will comply with the Employer's current working regulations, and with any additional measures that the Employer may see fit to introduce for health and safety reasons.

*He/she* further agrees to respect the rules of confidentiality, as required of all employees.

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### **Article 12**

Either the Employer or the School shall have the right to rescind the present Contract, subject to prior discussion.

In that event, all parties concerned are to have been notified and consulted in advance.

### **Article 13**

Except where incompatible with the provisions of the present Contract, any special agreements already existing between schools and outside organisations of whatever nature remain valid.

Where applicable, they are attached here.

This contract consists of five ( 5 ) pages and thirteen ( 13 ) articles.

This contract is signed in three ( 3 ) original copies by the Student, the Employer and the School Management.

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**FOR THE EMPLOYER**

Company stamp

\_\_\_\_\_  
“ Read and agreed ”

\_\_\_\_\_, \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Place Day Month Year

**FOR THE SCHOOL**

School stamp

\_\_\_\_\_  
**Mr Brian Goggins**  
“ Read and agreed ”



\_\_\_\_\_, \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Place Day Month Year

**THE STUDENT**

\_\_\_\_\_  
Student’s signature  
“ Read and agreed ”

\_\_\_\_\_, \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Place Day Month Year

\_\_\_\_\_  
Signature of the adult responsible  
( If the student is a minor )  
“ Read and agreed ”

\_\_\_\_\_, \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Place Day Month Year