

School:	Date:
Address:	School Year:
Off-campus Teacher:	Phone:
Email:	

- The work site inspection must occur prior to student placement.
- A worksite—the specific off-campus location at which the student is involved in off-campus learning activities (Work-Study Programming, Work Experience, Career Internship, Green Certificate Program, Workplace Readiness/Practicum, RAP)—requires inspection and annual approval by the off-campus teacher. Should an accident or injury occur, the worksite requires a subsequent inspection before reapproval (see the Off-campus Education Handbook for details).
- Parental or guardian consent shall be obtained on the student's behalf, a student–employer agreement shall be signed by both parties and the parents/guardians of underage students, and this inspection record shall be on file at the school attended by the student and copies sent before the student is placed at the worksite.
- Students and parents/guardians signing the Work Agreement are considered to have signed the Workers' Compensation Board Deeming Order Application for workers' compensation coverage.

WORK SITE
A.

Company Name:	Type of Business:
Company Address:	
Company Contact Person:	
Telephone	Cell:
More than one work site involved: <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, complete Box B	

B.

Work Site Location(s):	
Supervisor (onsite):	
Telephone	Cell:

If more than one supervisor involved please list all:

Number of students to be placed at work site: _____

Does the employer or job have a minimum age requirement for employees at work site? ___Yes ___No

Driver's license required: ___Yes ___No

Work Site Approval for Specified Programs

- Work-Study Programming
- Work Experience
- Career Internship
- Green Certificate Program
- Workplace Readiness/Practicum
- RAP

_____Approved _____Not Approved (provide documentation)

Inspecting Off-campus Teacher (please print): _____

Date: _____ Signed: _____

Principal/Assistant Principal (please print): _____

Date: _____ Signed: _____

All checklist questions must be reviewed prior to approving this work site		Acceptable	Needs Improvement	Not Acceptable
1	Who will provide onsite supervision and job-related training for the student? Name/position of supervisor:			
2	Will job-related health and safety training and orientation be provided to the student? <input type="checkbox"/> YES <input type="checkbox"/> NO			
3	Is the student expected to wear any personal protective equipment (PPE)? <input type="checkbox"/> Yes (please specify, below) <input type="checkbox"/> No <ul style="list-style-type: none"> <input type="checkbox"/> Hearing protection <input type="checkbox"/> Eye protection <input type="checkbox"/> Footwear <input type="checkbox"/> Headwear <input type="checkbox"/> Gloves <input type="checkbox"/> Coveralls/uniform <input type="checkbox"/> Other 			
4	Is the employer familiar with the process for reporting a student injury? (Employer must be informed that the student is an employee of Alberta Education for WCB coverage.) <input type="checkbox"/> Yes <input type="checkbox"/> No			
5	Are there emergency preparedness procedures in place; e.g., fire, spill? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not relevant			
6	Is a trained first aider available to the student at all times while the student is working? <input type="checkbox"/> Yes <input type="checkbox"/> No			
7	Are fire extinguishers and first-aid kits maintained and readily available? <input type="checkbox"/> Yes <input type="checkbox"/> No			
8	Are emergency exit/safety signs clearly visible? <input type="checkbox"/> Yes <input type="checkbox"/> No			
9	Is emergency eyewash equipment (if necessary) maintained and readily available? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not relevant			
10	Identify the most critical potential hazards or dangers of this job from the list below: <ul style="list-style-type: none"> <input type="checkbox"/> Chemical – exposure to solvents, asbestos, dangerous gases (e.g., carbon monoxide) <input type="checkbox"/> Biological – exposure to moulds, parasites, blood, body fluids <input type="checkbox"/> Ergonomic – lifting heavy or awkward materials, repetitive work <input type="checkbox"/> Physical – manual lifting, exposure to noise, radiation, workplace violence, dangerous machinery, confined spaces <input type="checkbox"/> Psychological/Cultural Factors – stress, harassment, crude language, gender considerations (e.g., the student is the only male/female at the worksite) Have these hazards been identified and controlled by the employer? <input type="checkbox"/> Yes			

	<input type="checkbox"/> No			
11	How has the student been made aware of these hazards/dangers? Explain the messaging:			
12	Identify the tools, materials, and equipment the student will be expected to use or handle: <input type="checkbox"/> Hand tools Heavy equipment <input type="checkbox"/> Power lift equipment Vehicle operation <input type="checkbox"/> Power tools <input type="checkbox"/> Other hazardous machinery _____ <input type="checkbox"/> other _____			
13	Does this work site appear to provide an orderly, well-maintained, safe, and caring work and learning environment? <input type="checkbox"/> Yes <input type="checkbox"/> No			