**SB to look at other questions to add to this……..**

**PVG**

**H & S**

**Equality**

**Code of Practice/ethics**

**Any thing else?**

**Meeting arrangements**

**Supervised Practice – what it is and what is not?**

**There are also templates from Providers which if we amalgamate may give us a gold standard contract template**

**Practice Placement Contract**

**Programme………………………………………… Year of Study………………….**

|  |  |  |
| --- | --- | --- |
| **Name of Student:** | |  |
| **Year of Study applied for:** | |  |
| **Student Mobile number:** | |  |
| **Student Email address:** | |  |
| **Name the proposed organisation** | |  |
| **Student Job title (where applicable):** | |  |
| **Workplace Supervisor details:** (This should be the person who will support you in your practice placement)  Name:  Email:  Phone:  Are they CLD Qualified or Registered with CLDSC? Y/N  IF not, why is it appropriate that they should be your practice supervisor for your CLD Professional Practice Placement? | |  |
| **Supervision Arrangements:** Please outline the planned supervision arrangements e.g. regularity, dates and times:  **Hours per week**  **Please circle**:  **Agreed attendance(daily, weekly etc):**  (requires ?? hours from beginning MM/YY to MM/YY) | | Paid Unpaid |
| **PVG check** :  NEED TO DECIDE WHAT IS APPROPRIATE FOR THIS CHECK!  Does your organisation require a PVG  If yes, will your organisation undertake this on the student’s behalf?  Detail actions to be taken if no PVG is obtained in time for start of placement? | | Yes No  Yes No |
| Describe the proposed supervised practice opportunities (from MM/YY to MM/YY) in the following areas: | | |
| **Placement Induction:** Please outline the planned induction activities (including but not limited to):   * Code of Practice * Health and Safety * Code of Ethics * Equality and Diversity * Risk assessment/duty of care |  | |
| Name the geographical area you will be working in.  Name 2-3 groups that you will work with and define the purpose.    Name some potential networks (local) that you will regularly participate in. |  | |

|  |
| --- |
| **Student Professional Learning Requirements:** (Refer to the learning needs identified in their Professional Learning Profile appendix 3.) Link to Competences on CLDSC website? Should this only be Competences or do we need a focus also on Ethics and Values? |
| **Know and understand the community in which we work** |
| **Build and maintain relationships with individuals and groups** |
| **Provide learning and development opportunities in a range of contexts** |
| **Facilitate and promote community empowerment** |
| **Organise and manage resources** |
| **Develop and support collaborative working** |
| **Evaluate and inform practice** |

|  |
| --- |
| **Placement Work Programme:** Outline the key areas of work that the Student CLD Practitioner will undertake and how these will address the learning requirements listed above. |

Student’s signature

Date

Placement Supervisor’s signature

Date

Placement Supervisor’s Employer Signature

Date

Tutor’s signature

Date

**This Programme is approved by *The Community Learning and Development Standards Council Scotland*. It is therefore a requirement that students undertake ?? hours of relevant Community Development practice (paid /unpaid) between MM/YY to MM/YY**

Practice & Disclosure Declaration: I declare that, to the best of my knowledge, all of the above information I have given in connection to my Practice Placement application is correct.

Email completed form to: ??

**Signed: Date:**