For Students in Workplace or Simulated Workplace Learning

1. I will take part in workplace learning in a manner that reflects positively on me and TAFE NSW-Western Sydney Institute.

2. I will use my skills and knowledge for the betterment of the workplace, the clients and families.

3. I will comply in all my behaviour and learning in accordance with appropriate legislation, all relevant organizational policies & procedures including that relating to the protection of children and young people and Occupational Health & Safety (OH & S).

4. I will behave with integrity and respect in my dealings with others in the workplace including my Agency, Supervisor/Manager fellow workers, clients, their families/significant others and other relevant stakeholders. I will place a high priority on meeting occupational health and safety requirements of the service.

5. I will dress appropriately for the workplace and respect organisational dress policies.

6. I will be punctual.

7. I will notify the workplace and my TAFE teacher(s) as soon as possible if I am unable to attend because of illness or other unavoidable circumstance.

8. I will make every effort to fit into the workplace and work with others in a cooperative, collegial manner. I will implement feedback received from my Workplace Supervisor or TAFE teacher(s).

9. If I feel I am asked to undertake a task, which to my knowledge has not been agreed upon between my teacher and the Agency, I will inform my Workplace Supervisor and my TAFE teacher(s)

10. If I have any problem I will communicate with my Workplace Supervisor and my TAFE teacher(s).

11. I will maintain the confidentiality of the service, its clients, families/significant others, and other relevant stakeholders, in accordance to all applicable organizational & legislative requirements.

I understand that if I do not adhere to this code of conduct I may not be allowed to participate in workplace learning in future and that if I commit serious breaches of the Student Discipline Policy I may be excluded from this course. Other penalties may also apply

THE STUDENT’S SIGNATURE IS REQUIRED TO ACKNOWLEDGE RECEIPT OF THIS DOCUMENT

Student name

________________________________________

Signature

(Please print)

________________________________________

Date

________________________________________

Attach Student ID Barcode Here