Appendix D: WHS-PRO-028 Student Placement Procedure
Placement Host Work Health and Safety Proforma

Printed copies of this checklist are uncontrolled, and currency can only be assured at the time of printing

Name of Placement Host:

Address:

Each item in this checklist must address each workplace at which a student will undertake placement activities (e.g. main office, construction sites, a client's premises).
If you would like assistance to complete this checklist, please contact the JCU Placement Coordinator .

Item	Requirement		
1	Please indicate the nature of the environment in which the placement student will be exposed:		
	‘ 2 I I L F H	‘ Laboratory	‘ : R U N V K R S
	‘ + R V S L W D O & O L Q L F	‘ (G X F D W L R Q D O , Q V W L W X W L R Q	‘ 1 R U V L Q J \
	‘ 2 W K H U		

Item	Requirement	Yes	No
2	The Placement Host is aware that all accidents / injuries involving placement students must be reported to JCU through the Placement Coordinator with 24 hours of occurrence?		

☐ The workplace of the Placement Host is covered by a workplace health and safety management system that is certified by a recognised independent authority. Please attach evidence of certification. No further information is required .

☐