

Name:	Contact Number:
School/College:	Placement Dates:

It is a requirement of East Grampians Health Service (EGHS) that you review the topics listed below and complete the attached training packages.

By ticking the boxes below you are agreeing to comply with the policies and their requirements:

- COVID-19 Infection Control
- National Hand Hygiene Initiative
- Privacy and Confidentiality
- Child Safety Code of Conduct
- Social Media
- Staff and Volunteer Image Consent Form

To ensure a beneficial work experience week, please advise your area/s of interest by ticking the below box/s and provide a brief summary of why this area is of interest to you.

<input type="checkbox"/> Doctor/Medicine	<input type="checkbox"/> Nursing
<input type="checkbox"/> Health Care Worker	<input type="checkbox"/> Leisure and Lifestyle Worker
<input type="checkbox"/> Midwifery	<input type="checkbox"/> Physiotherapy or Exercise Physiology
<input type="checkbox"/> Pharmacy	<input type="checkbox"/> Medical Imaging/Radiology
<input type="checkbox"/> Speech Pathology	<input type="checkbox"/> Podiatry
<input type="checkbox"/> Occupational Therapy	<input type="checkbox"/> Social Worker

Summary of why you are interested in the above:

I _____ (student name) certify that I have read and understood the topics in the EGHS Online Student Orientation in preparation of my placement.

I also certify that I have read and understood the EGHS Work Experience Student Handbook.

Signature:	Date:
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Once completed, please upload this form to the student declaration field on the EGHS website:

<https://eghs.net.au/education/orientation-requirements>



Integrity



Excellence



Community



Working Together



Learning Culture