Kickstart Job Placement

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| **SECTION 1: EMPLOYER DETAILS** | | | |
| Employer: |  | Contact Name: |  |
| Telephone: |  | Email: |  |
| Address: |  |  |  |
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| **SECTION 2: HEALTH AND SAFETY AND INSURANCE INFORMATION** | | | |
| **Health and Safety** | | | |
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| **Insurance** | | | |

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| SECTION 3: SUMMARY OF PLACEMENT | | | |
| Days/Hours: |  | Location: |  |
| Any Training Required? |  |  |  |
| Brief Summary of Tasks | | | |
| Brief Summary of Tasks | | | |
| SECTION 4: EMPLOYABILITY SKILLS | | | |
| Allocation of responsibility – Employer/Probe | | | |
| IAGGoal SettingCommercial AwarenessInterview SkillsCVAttendance/TimekeepingBasic Vocational Training (if required) | | | |
| SECTION 5: JOB DESCRIPTION | | | |
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| SECTION 6: PERSON SPECIFICATION | | | |
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| SECTION 7: PROPOSED COSTS | | | |
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| **ADDITIONAL NOTES** | | | |
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