

## Work-Integrated Learning (WIL)

### Student Placement Agreement

Charles Darwin University (CDU) has a placement agreement (*Agreement*) with various healthcare providers and facilities across Australia (*Host*) which enables students to complete their work-integrated learning (*Placement*), as required for the course in which they are enrolled.

Prior to CDU organising a placement for students in a Host, they are required to read and sign this Student Placement Agreement (*Student Agreement*). This Student Agreement details the students' responsibilities to CDU and the Host during their Placement and other important information, of which they should be aware. The Host may place additional responsibilities and requirements upon the students as part of their Placement, per the Agreement.

Once completed by the student, a copy of this acknowledgment should be provided to CDU and the Host, and the student should retain a copy.

By signing this *Student Agreement*, students acknowledge and agree to the following:

1. I will not attempt to find my own Placement without prior approval from CDU.
2. I will not contact any Host or other universities to discuss possible Placement opportunities and options.
3. I will conduct myself as a responsible student and positively represent CDU.
4. I am over the age of 18 years.
5. Prior to commencing my Placement, I will:
  - (a) Read and understand CDU's [Code of Conduct – Students](#) and any other relevant policies (such as [Privacy & Confidentiality Policy](#), [Bullying, Harassment & Discrimination Policy](#), and [Child Safety Policy](#)) and will abide by them.
  - (b) Read and understand the University (Student Conduct) By-laws and agree to comply with them.
  - (c) Undertake all required immunisations and health screening as indicated by the Faculty of Health and provide evidence of completion.
  - (d) Advise CDU and the Host of any medical, physical, or psychological concerns that may affect my ability to perform the duties required on Placement or required to complete the Placement via a [Fitness to Practice Declaration](#).
  - (e) Provide CDU with a copy of my student ID card.
  - (f) Provide CDU with a National Police Check that is less than 12 months old and does not expire before or during the Placement.
  - (g) Provide CDU with a current Working with Children Check/Working with Vulnerable People (as per state/territory requirements).
  - (h) Undertake the Equal Opportunity online training module, First Nations Cultural Safety training, and Hand Hygiene training, and provide CDU with evidence of completion.
  - (i) Provide CDU with evidence of my current registration with the Australian Health Practitioner Regulation Agency (AHPRA)<sup>1</sup> and/or any other relevant regulatory authorities, plus mandatory notification requirements.

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<sup>1</sup> Information about students will be entered on the AHPRA Student Register following the applicable National laws. The information is not published online and is not publicly available. The information AHPRA may request from CDU includes: Student ID number; student personal details; the name of the approved program of study or clinical training being undertaken by the student at CDU; the date on which the student started the approved program of study or clinical training; the date on which the student is expected to complete the approved program of study or clinical training; for students that have completed or otherwise ceased to be enrolled in the approved program of study or clinical

I acknowledge that:

- Work integrated learning (WIL – Placement) is a requirement of the course I am enrolled in and if I do not fulfill the requirements of the Placement (including attendance requirements), I may fail the unit.
- My placement may be terminated if I have not supplied the required pre-placement documentation by the specified deadline as outlined by the Faculty of Health.
- My Placement may be terminated if my performance or conduct is not satisfactory or if I have breached any of the terms of the *Student Agreement* or *Student Deed Poll*.
- My pre-placement documentation will be held on file by CDU and the Host to administer the Placement.
- CDU will inform the Host that a National Police Check and Working with Children/Working with Vulnerable People Check have been obtained and where they disclose a court outcome, charge, or matter under investigation, CDU may provide this information to the Host to allow them to decide whether I can complete my Placement.
- I will notify CDU & the Host if the status of my National Police Check and/or Working with Children/Working with Vulnerable People Check changes before or during my Placement.

During the Placement, I will:

- Commit myself to the work and duties required on Placement and conduct myself in a safe and professional manner.
- Comply with all rules, regulations, protocols, policies, procedures, and by-laws of CDU and the Host, including academic and disciplinary policies and any training provided by the Host.
- Adhere to all Health and Safety legislation.
- Notify both CDU & the Host if, for any reason, I am unable to attend all, or part of the Placement and provide supporting documentation.
- Not allow my personal employment or commitments to impact my Placement hours or performance, including negotiation my Placement hours.
- Comply with all reasonable instructions from CDU & the Host, with the Host providing final instructions on matters relating to patient/client care or service.
- Work within my scope of practice as a CDU student.
- Immediately inform both CDU & the Host of any accident or incident that I am involved in during my Placement.
- Respect the patient/client of the Host's right to refuse my care or service.
- Not disclose the Host's or patient's/client's confidential information in any form or manner *except* where required to complete the Placement or where the appropriate consent has been obtained.
- Accept that if I breach confidentiality, my Placement may be terminated, and I may fail the unit.
- Unless specifically authorised by the Host in accordance with the Agreement, do not drive my personal vehicle for placement-related activities.
- Not be employed by the Host or receive remuneration unless agreed by CDU & the Host before starting my Placement (a different Agreement will be required).

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training; the date of the completion or cessation and; the reason why the student completed or otherwise ceased to be enrolled in the approved program of study or clinical training. No fee applies to student registration.

## Declaration

By signing this document, I confirm that I have read and agree to the terms and conditions as set out in this Agreement, and to the best of my knowledge, there is no reason why I should not undertake the placement.

I declare at the time of signing this Agreement there is no direct or indirect conflict of interest likely to arise which may, or may appear to, impact my ability to complete my Placement. If a conflict arises or appears likely to arise, I will immediately notify CDU & the Host and complete the [Conflict of Interest](#) form.

Student Name: \_\_\_\_\_

Student ID Number: \_\_\_\_\_ Course Code: \_\_\_\_\_

Course Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_