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| --- | --- |
| Name of Tourism Business | Click here to enter text |
| Tourism Business Type | Tourism operator  Attraction  Travel agency  Other (specify; must be Tourism-specific) *Click here to enter text* |

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| --- | --- | --- | --- | --- |
| Teacher Name | Click here to enter text | | | |
| Date(s) industry placement | **Start Date** | Enter a date | **End Date** | Enter a date |
| Total Hours of industry placement | Click here to enter text | | | |
| Skills covered during industry placement | *Select (tick) all applicable categories:*  Source and use information on the tourism/travel industry  Interact with customers  Show social and cultural sensitivity  Participate in safe and environmentally sustainable work practices  Uses business technology | | | |
| Role during industry placement | *Select (tick) the most relevant category:*  Observer  Participant  Assistant  Instructor | | | |
| Activity Summary  *Specify any observations/duties performed.* | Click here to enter text | | | |

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|  | CHECKLIST OF LEARNING |
|  | Understands the policies and procedures of work practices at a Tourism business**.** |
|  | Understands hazards in the workplace, infection control and other safety procedures**.** |
|  | Appreciates the importance of confidentiality, privacy, legislation, and respect for social and cultural differences within a tourism setting**.** |
|  | Identifies employee roles within the Tourism business (per organisation chart)**.** |
|  | Understands the different forms of communication between employees, customers, and colleagues. |
|  | Recognises the need for accurate record keeping and record management in a Tourism business**.** |
|  | Participates in a workplace meeting that addresses current tourism and travel industry information as it integrates into daily work activities. |
|  | Greets and serves customers and responds to a range of basic customer service enquiries. |
|  | Communicates with customers and colleagues from diverse backgrounds**.** |
|  | Participates in organisational WHS management practices**.** |

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| Supervisor Name | Click here to enter text | | |
| Organisation  *Name of Tourism Business* | Click here to enter text | | |
| Position | Click here to enter text | | |
| Signature |  | **Date** | Click to enter a date. |