

# WORK EXPERIENCE PROJECT.

## Participant Information

Thank you for your interest in Deaf Children Australia's Work Experience Project.

### About us

Deaf Children Australia (DCA) is a nonprofit that promotes the growth and social inclusion of deaf and hard of hearing (DHH) children and youth. Our transformative programs, events, and resources build confidence and connections, fostering a more inclusive Australian community.

DCA is a child safe organisation with policies and procedures to protect and promote the safety and wellbeing of the children we work with.

### About the project

In Victoria, careers education is woven into various subjects starting in Year 7, helping students link their studies to future careers. From Year 10, students can explore career paths through workplace placements, gaining industry insights and a deeper understanding of paid work, including the importance of independence and self-advocacy.

However, DHH students face unique challenges that can limit their opportunities for work experience without the right support.

In Australia, around 83% of DHH students attend mainstream schools with limited access to Teachers of the Deaf (TOD) or other specialist supports. Teachers and career advisors often lack the specialist tools and knowledge to help DHH students plan for challenges, secure placements and succeed in work experience opportunities.

Recognising this gap, the Work Experience Project aims to:

- Provide skills development opportunities for teachers and careers practitioners to enhance their ability to engage DHH students in careers education and work experience.
- Encourage host employers to create inclusive and accessible work environments for DHH young people.

Our goal is to remove barriers and facilitate successful work experience placements by providing teachers, career practitioners, and host employers with practical training and resources to increase their awareness of the unique needs of DHH students in the workplace.

This 3-year project is funded by the generous support of the Brian M Davis Charitable Foundation, with additional funding from The Telematics Trust for videography, graphic design, and educational design for eLearning resources.

### What's involved?

DCA will support 10 DHH students in 2024 and 20 in 2025 in work experience placements. These placements will align with school career programs and Department of Education guidelines to ensure compliance with curriculum requirements.

Most students will arrange their own placements with support from teachers and families, supported by the project team and project resources. If needed, the project team will help find suitable placements for participating students.

Our focus is on the success of each students' placement. We will work with teachers and students to achieve individual work experience goals, offering guidance and support both at school before placement and during their time in the workplace. Pre- and post-placement self-assessments will help identify student strengths, challenges, and strategies, and students will be asked to keep a video diary documenting their experience. Insights will be shared with participating schools to support and evaluate student learning and outcomes,

Data collected from these placements will be used to:

- Evaluate the impact of implemented supports on work placements.
- Identify challenges, gaps and areas to improve.
- Inform the development of eLearning resources for teachers, career practitioners, and DHH students to aid in future placements.

Recognising that deaf-aware workplaces are crucial for enhancing career development and work experience opportunities for DHH students, DCA is creating Deaf Awareness Training (DAT) as an eLearning resource for employers and educators. Employers hosting DHH students will be encouraged to complete DAT prior to commencement of placements, allowing us to assess its real-world impact.

DHH students who have previously completed work experience will be invited to share their insights through anonymous surveys, helping us identify challenges, effective strategies, and gaps that this project can address.

An Advisory Group guides the project in assessing the support and resources provided to DHH students in the workplace. The group includes representatives from schools specialising in deaf education and the Victorian Deaf Education Institute (VDEI), and Dr Renee Punch of Southern Cross University is providing expert feedback on post-school transitions into higher education and employment. We will also gather direct feedback from teachers, career practitioners, and host employers involved in the project.

Deidentified summary information from data collected will be used for project reporting.

## How to participate?

Eligible high school students can apply to participate in the project by completing the attached application and consent forms. Once the team at DCA receives your application we will arrange a time to meet with you and learn about your current experience and aspirations. If your school has not signed up to work with us already, we can approach them to work with us on your behalf.

Students who previously completed work experience may be asked to provide insights into their experience in a work placement by completing an anonymous post-placement reflection survey. A consent form must be completed if the student is under 18 years of age.

## Further information

If you have any questions about this project or would like more information, you can talk to the participating school representative or directly to the project team at [pathways@deafchildren.org.au](mailto:pathways@deafchildren.org.au) or by telephone on 03 9539 5300 or 0447 096 454.

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## Application Form

### Student details

Student name	
Preferred pronoun	
Email address	
Postcode	
Current year level at school	<input type="radio"/> Year 9 <input type="radio"/> Year 10
Year of proposed work experience placement	<input type="radio"/> 2024 <input type="radio"/> 2025
School name	
Campus	
Placement coordinator	
Coordinator email	

### Parent/Guardian Details

Name	
Relationship to student	
Mobile	
Email	

A signed Consent Form is attached to support this application

# Student Information

Information collected here will help us understand what supports may be needed to facilitate a successful work experience placement for you.

## Communication and Identity

<p>1. I am / I describe myself as</p>	<p><input type="radio"/> Deaf/ Culturally Deaf</p> <p><input type="radio"/> deaf</p> <p><input type="radio"/> hard of hearing</p> <p><input type="radio"/> partially deaf</p> <p><input type="radio"/> hearing impaired</p> <p><input type="radio"/> other</p> <p>If 'other', tell us your preferred term:</p>
<p>2. My devices</p>	<p><input type="radio"/> Cochlear implant</p> <p><input type="radio"/> BAHA</p> <p><input type="radio"/> Hearing aids</p> <p><input type="radio"/> I don't use hearing devices</p>
<p>3. My level of hearing loss is</p>	<p><input type="radio"/> Mild</p> <p><input type="radio"/> Moderate</p> <p><input type="radio"/> Severe</p> <p><input type="radio"/> Profound</p>
<p>4. Do you have hearing loss on one or both sides?</p>	<p><input type="radio"/> Single-sided (unilateral), right side</p> <p><input type="radio"/> Single-sided (unilateral), left side</p> <p><input type="radio"/> Double-sided (bilateral), both sides</p>
<p>5. Communication method</p>	<p><input type="radio"/> Auslan</p> <p><input type="radio"/> Oral (English)</p> <p><input type="radio"/> Bilingual (Auslan / English)</p> <p><input type="radio"/> Bilingual (Auslan / Language other than English)</p> <p><input type="radio"/> Bilingual (Sign language other than Auslan / English)</p> <p>Tell us the other language/s you speak and/or sign:</p>

<p>6. Do you have a preferred interpreter?</p>	<p><input type="radio"/> No</p> <p><input type="radio"/> Yes</p> <p>Tell us who your preferred interpreter is:</p>
<p>7. Do you use other communication aids?</p>	<p><input type="radio"/> No</p> <p><input type="radio"/> Yes</p> <p>Tell us what else you use to communicate:</p>

## Interests and Goals

<p>8. Do you know what industry you want to work in?</p>	<p><input type="radio"/> No</p> <p><input type="radio"/> Yes</p> <p>Tell us the industry that interests you:</p>
<p>9. Have you done this type of work before?</p>	<p><input type="radio"/> No</p> <p><input type="radio"/> Yes</p> <p>If 'yes', tell us where and when:</p> <p>Tell us three things you enjoyed about this work:</p> <ul style="list-style-type: none"> <li>•</li> <li>•</li> <li>•</li> </ul> <p>Tell us three things you found challenging or difficult:</p> <ul style="list-style-type: none"> <li>•</li> <li>•</li> <li>•</li> </ul>

<p>10. Have you worked anywhere else before?</p>	<p><input type="radio"/> No</p> <p><input type="radio"/> Yes</p> <p>If 'yes', tell us where and when:</p> <p>Tell us three things you enjoyed about this work:</p> <ul style="list-style-type: none"> <li>•</li> <li>•</li> <li>•</li> </ul> <p>Tell us three things you found challenging or difficult:</p> <ul style="list-style-type: none"> <li>•</li> <li>•</li> <li>•</li> </ul>
<p>11. Have you arranged a host employer?</p>	<p><input type="radio"/> No, I need help finding a suitable host employer</p> <p><input type="radio"/> No, but I know who I want to approach</p> <p><input type="radio"/> Yes</p> <p>If 'yes', tell us where and when your placement will be:</p>
<p>12. Has your school agreed to your choice for work experience?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> No, but they have suggested other options for me</p> <p>Tell us the other options your school has suggested for you:</p>
<p>13. Do any other options for work experience interest you?</p>	<p><input type="radio"/> No</p> <p><input type="radio"/> Yes</p> <p>Tell which other options interest you:</p>

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## Consent Form

Thank you for your application to participate in the Work Experience Project by Deaf Children Australia (DCA).

To coordinate the best support for your work experience placement, DCA may need to collect and/or release your personal information from/to a third party, specifically the student's school or host employer.

DCA will only collect and/or release your personal information with your consent or if required by law.

The personal information we collect about you will only be used for the primary purpose of supporting your work experience placement.

Deidentified data will be used for project reporting and will inform the development of eLearning resources and professional development for teachers, giving them the tools to better support and facilitate work experience placements for deaf and hard of hearing students.

DCA will comply with relevant Privacy legislation, regulations, and standards for dealing with your personal information. This commitment is outlined in our Privacy Policy.

As all students included in this project are under 18 years of age, we require that a parent or guardian for each student:

- Consents to the student's participation in the Work Experience Project as explained in the Participant Information provided as part of the application process, and
- Consents to collection and/or release any personal information about the student to a third party to facilitate the student's work experience placement.

Student name	
Parent / Guardian name	
Relationship to student	
Mobile	
Email	

Consent can be revoked at any time by contacting the Work Experience Project team by email at [pathways@deafchildren.org.au](mailto:pathways@deafchildren.org.au) or by telephone on 03 9539 5300 or 0447 096 454.

DCA's Privacy Policy, Child Safe Policy and Quality Policy are available online at [deafchildreinaustralia.org.au](http://deafchildreinaustralia.org.au) or by request.

## Parent / Guardian Declaration of Consent

- I have received and understand the Participant Information provided by Deaf Children Australia (DCA) about the Work Experience Project and give my consent for my child/ward to participate in the project as described.
- I give my consent for DCA to collect and/or share relevant information about my child/ward from or with the organisation, provider, or agency (third party) listed below. This includes my child/ward's school and host employer.

School	
Host employer	

- I understand that I can revoke or amend my consent at any time.

Parent / Guardian name	
Signature	
Date	