

## Post-Placement Feedback Form

Student Name and  
Student ID Number:

Placement Provider Contact's reflection on the placement, including what went well and any practical issues/concerns encountered:

Student's comments regarding the placement:

Student to confirm that the following were made available at the start of the placement:

Employer's Liability/Public Liability insurance certificate (or equivalent when overseas placement)

Health and Safety briefing

Placement Organiser summary: