



EUROPÄISCHE SCHULE Praunheimer Weg 126 D-60439 Frankfurt am Main

Tel.: 069-92.88.74.0  
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CONTRACT  
between

Employer:

Student:

Contact person:

Address:

Address:

Telephone number:

Fax number:

I agree to allow ..... (name of student) to undertake work  
experience in my organisation from ..... to ..... (date)

The total number of hours per day ( ..... hours) is in accordance with the legal  
employment regulations for young people.

The school work experience will be carried out as part of the European School's 'Careers  
Guidance Programme' and should contribute to the students' experience of the world of work.

During this period the student is released from regular school lessons and is fully insured on  
his/her journeys to the place of work, provided s/he receives no salary for his/her work.

Please forward a copy of this contract to the European School Frankfurt.

At the beginning of the work experience you will receive a form regarding the student's  
performance at work. After you have completed it, please give this form to the student at the  
end of their work experience.

I understand and agree to the above:

.....  
Signature of student

.....  
Signature of employer