

# Work Experience Placement Form



## Work Experience Consent

I give consent for my son/daughter to attend work experience from Monday 13th July until Friday 17th July 2020.

Name of Parent/Carer \_\_\_\_\_

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

## Medical Conditions

Please indicate below any new medical conditions that your son/daughter has had diagnosed since our last Data Collection.

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## Student Details

Surname:	First Name:
Date of Birth:	Form Group:
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Prefer not to say	

## Work Experience Placement

Please make sure that you contact the company/business involved **BEFORE** you complete the details below. We will check your placement to confirm all the details and ensure that they have the correct Insurance Cover and that they have done a recent Risk Assessment for you to work there.

Work Experience is about giving you a taste of the world of work, not about finding a job. Placements with the Police, Fire Services and the Armed Services are generally not available. The following organisations cannot offer work experience:- PAWS Veterinary Centre, Whitestone Veterinary Clinic, Nuneaton Magistrates Court, Leisure Centres run by SLM (Everyone Active), Wembrook Primary School, Milby Primary School and the local hospitals.

Name of Company/Business:	
Address Line 1 :	
Address Line 2 :	
City:	Post Code:
Company Contact Name:	
Contact Telephone:	
Contact Email:	
Department working in:	
Type of work:	