

Work Experience Application Form

Please return to the Work Experience Office by
Wednesday 8th February 2017

FIRST NAME: _____

SURNAME: _____

MENTOR GROUP: _____

ADDRESS: _____

POST CODE: _____

HOME PHONE: _____

MOBILE PHONE: _____

DATE OF BIRTH: ____ / ____ / ____

AGE (when out on Work Experience in June 2017): _____

SUBJECT DETAILS

Subjects being studied in Year 10	Target Grades	Subjects being studied in Year 10 (options)	Target Grades
Mathematics.....
English Language.....
English Literature.....
Science.....
	

A) CHOICES: Please write the job number and type of business (see list) and explain the reason/s for your placement choices.

Choice1 (Job number): _____

Type of Business: _____

Reason for choice:

Choice 2 (Job number): _____

Type of Business: _____

Reason for choice:

Choice 3 (Job number): _____

Type of Business: _____

Reason for choice:

B) OWN PLACEMENT: If you have arranged or wish to arrange for your own placement please complete *all* the following details:

Name of Company:

Address of Company:

Phone Number:

Email address:

Name of the contact person at the Company:

Type of Business:

What stage has your request reached?

Why did you choose this placement?

C) Is there any other area or job you would have liked to apply for that wasn't available?

If yes, please explain:

1. LEISURE ACTIVITIES: Write about your hobbies, interests, clubs you belong to, what you enjoy doing in your free time, etc.

2. FURTHER EDUCATION: What are your thoughts about what you would like to do in the future? (Do you wish to go to university, work, what are your areas of interest, etc.)

3. WORK EXPERIENCE: Give details of any previous employment (part-time or Saturday jobs) and/ or voluntary work including dates:

4. ACHIEVEMENTS: List 3 achievements that you are proud of (i.e. awards, diplomas, talents, 100% attendance, participating in any local/school extra-curricular activities):

1.

2.

3.

5. HEALTH: Do you suffer from any illness or do you have any disability that might affect the kind of work you are able to do? Yes / No

If yes, please provide details.

Parents/Carer's comments:

Parent/ Carer's signature: _____

Date: _____

Student's signature: _____

Date: _____