

Work placement form

Placement you are applying for:

Date of placement:

Section 1: Your details

Personal details

Title: Surname: Forename(s):

Permanent address (including post code):

Home telephone: Mobile telephone:

Email: Date of birth:

Name, phone number and relationship to next of kin or in case of emergency contact:

Are you in education: Yes No

If yes please say where you are studying:

GCSEs, A levels or other exams taken or subjects being studied and predicted grades:

Subject/level:	Grade:	Subject/level:	Grade:

Previous work experience, volunteering or paid work (if any):

Name of organisation:	Role:	Dates from - to:

Please explain why you have chosen this placement and what you hope to get from it. Include your hobbies and interests and your plans for the future.

Gender:

Ethnicity:

Are you in disabled: Yes No

Are there any issues we should be aware of?

Supporting Statement

If you are attending a school/college ask a teacher or advisor to provide some information about your application, this could include what they think you might get from the placement, or future career plans. If you do not attend school or college please ask someone who can act as your referee to explain why you are suitable for a placement.

Why is this placement suitable?

Are there any issues that we need to be aware of?

Contact details

Teacher or advisor name:

Signature:

Telephone number: Email:

I confirm that the information given on this application is correct. I understand that any false claim may result in my application being refused or my placement being cancelled.

Signature:

Print name: Date:

Parent/guardian's signature (if under 18):

Print name: Date:

This form should be returned either by post or emailed to: Education@prospect-hospice.net