



Confirmation of Work Experience Year 12 - July 2024

For office use only:

Date form handed in

Student information:

Student name	
Form	
Emergency contact name:	
Emergency contact number:	
Please indicate whether you receive either of the following?	16-19 Bursary <input type="checkbox"/> Free School Meals <input type="checkbox"/>

Placement contact information:

Name of Company/Organisation of confirmed placement	
Placement contact name 1 (Main contact person)	
Contact 1 – Work phone number: Email Address:	
Placement contact name 2 (Secondary contact person)	
Contact 2 – Work phone number: Email Address:	
Placement Address: (Where you will be based)	
Has a Pre-Placement meeting/call date been arranged? (if appropriate)	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has this placement:	Been organised through a family member/friend? <input type="checkbox"/> Been found independently? <input type="checkbox"/> Got Employer Liability Insurance? <input type="checkbox"/>

Please return this form to Miss Jacques in Student Services ASAP.
a.jacques@bishopchalloner.bham.sch.uk

	Got more than one person working there? <input type="checkbox"/>
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Placement details:

Nature of Work and main work tasks:	
Describe (in as much detail as you can) the setting you will be working in: e.g. large busy office/shop floor/hospital ward/small lab/various sites in a factory etc.	
Will there be any travelling around as part of your placement?	Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please give details: IF yes, Parent/Carer consent is required. Please sign below to consent, but contact Miss Jacques if you do not. Parent/Carer signature Parent/Carer name
Are there any specific clothing requirements required? e.g. steel toe cap boots	Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please give details:
Agreed dates and times of placement:	Mon 08/07/24 - Fri 12/07/24 Yes <input type="checkbox"/> No <input type="checkbox"/> If no, please state placement dates below: _____ Start time _____ Finish time _____
What do you understand the lunchtime arrangements to be?	<input type="checkbox"/> Kitchen or canteen available to you on site <input type="checkbox"/> Shop close by

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	<input type="checkbox"/> Need to bring a packed lunch <input type="checkbox"/> Other (please give details below:)
Parent/Carer signature	<ul style="list-style-type: none"> • I have a good understanding of what this placement will consist of and give my consent for my son/daughter to participate in the work experience programme at the company/organisation outlined above. • I give my consent for my child to go off site at lunchtime if this is part of the lunchtime arrangement. • I am also happy for my contact details to be shared with the placement in case of an emergency. <p>Signed:</p> <p>Relationship to student:</p> <p>Date:</p>

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