

## YEAR 10 WORK EXPERIENCE

This form is to be used for Work Experience. All sections must be completed and returned to Queen Elizabeth's Grammar School (attention Ms Morgan) by .... Any paperwork received after this date will not be processed and alternative arrangements within school will be made.

DETAILS OF WORK EXPERIENCE PLACEMENT	
<b>Company /Provider</b>	
<b>Work Experience Supervisor</b>	
<b>Address</b>	
<b>Telephone Number</b>	
<b>Email Address</b>	
<b>Date of Work Experience</b>	

STUDENT DETAILS	
<b>Name</b>	
<b>Address</b>	
<b>Date of Birth</b>	
<b>Emergency Contact Name</b>	
<b>Emergency Contact Number</b>	
<b>School</b>	
<b>Future Career Path</b>	

*Where young persons below minimum school leaving age are to be engaged on Work Experience, relevant and comprehensive information on the findings of the risk assessment must be made available to the child's parent/carer.*

*The information need not be supplied in writing but if not, Work Experience Supervisor must still have a way of confirming that relevant and comprehensible information has been provided.*

Parent Name:	Signature:	Date: