

KS 4 / 5 Vocational Work Placement Matching Service Application Form

B&E Together Ltd, Manvers Campus,
Manvers Park, Wath-upon-Deerne,
Rotherham, S63 7EW
01709 513 380



School/Requesting Organisation: Main Contact:

Contact Tel No..... Fax..... Email..... Site.....

Course Title..... Course Year..... Course Unit

Student Details: Mr / Miss (please circle)	Surname:
First Name (s)	Address:
Tel No:
Mobile:
Emergency name & Tel No:	Post Code:
Date of Birth:	Age at Start of Placement: Years:Months:

Work Experience Dates:	From: <u>DAY / MONTH / YEAR</u>	To: <u>DAY / MONTH / YEAR</u>
Type of Placement Required:	Duration:	
Placement Days: M T W TH F	Total No. of Days:	Total No. of Hours:
At Placement: ALL DAY / MORNING / AFTERNOON	Incorporating: EVENINGS / WEEKENDS	
Travel Areas:		
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Work Experience Placement Choice:

Choice	Occupation – e.g. Sport	CLCI Code	Specific Work Area – e.g. School P.E.
1 st			
2 nd			
3 rd			
4 th			

Occupational / Career Aim / Interest in Particular type of work:

Useful Information – Please give details of any information which may affect the type of placement you should be offered. Please consider health/allergies, epilepsy, Saturday jobs, dress code, religion, colour vision, relevant personal concerns or fears:

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Hobbies & Interests:

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Learning Outcomes What do you hope to achieve from your placement / personal aims:

- 1
- 2
- 3
- 4
- 5
- 6

Subjects Studied & What Grades You Think You Might Get:

Subject	Grade	Subject	Grade	Subject	Grade

PARENT / GUARDIAN (please tick appropriate boxes)

I support my son / daughter's choice of placement

I do not support my son / daughter's choice of placement

I agree with the travel to work areas

I do not agree with the travel to work areas

Does your son / daughter have any health or other problems which might affect the placement **YES / NO** (if yes please give detail)

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Signed Parent Date

Do you have any other comments or concerns?

TEACHER (please comment as fully as possible)

Students ability: A – C D – F G + Below Other (please give detail below)

1. Do you agree that the students choices are suitable? YES / NO
2. Do you have any concerns about the student's standard of behaviour? YES / NO
3. Are you aware of any issues, which might affect the student's health, safety & welfare whilst on placement? YES / NO

If 'yes' to the above or you have any other information please give detail:

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Name: Signature: Date: