

CHICHESTER HIGH SCHOOL FOR GIRLS

WORK EXPERIENCE SELECTION FORM

7 – 18 JUNE 2010

(A) Your details (PLEASE COMPLETE THIS SECTION IN BLOCK LETTERS):

FULL NAME:	FORM:
PSHE TUTOR:	
HOME ADDRESS:	
	POSTCODE:
HOME TEL NO:	EMERGENCY TEL NO:
DATE OF BIRTH:	AGE ON 07/06/10:

COMPLETE SECTIONS A, B, C, D, E, F, G AND H for a school placement
COMPLETE SECTION A, D, E, F, G AND J if electing to find your own (TICK
SECTION B to confirm)

(B) Type of Work Experience required (Mark 1st, 2nd & 3rd Choice, etc.)

Office work	Working with the elderly	Estate Agency or surveyors or architects (limited places)	
Teaching or special needs	Working with children	Animals or stables (limited places)	
Leisure centres or other sport	Retail or charity shop or opticians	Floristry or garden nursery or environment (limited places)	
Catering and/or waitressing (limited places)	Hotels	Hair/beauty (limited places)	
Banks or accountancy or financial (limited places)	Art or graphic design or photography (limited places)	Solicitors or publishers or journalism (limited places)	
Other (please name)		TICK HERE IF FINDING YOUR OWN PLACEMENT – then go to D	

If you know the name of a company/organisation that you might like to go to, please write below i.e. Westgate Leisure
.....
(Please note that unfortunately this will not guarantee you a placement there)

(C) Area choice:

Apart from Chichester which areas/towns are you prepared to travel to:

How would you get there? i.e. car, train, bus, other

(D) Student profile – subjects currently being studied for GCSE:

(E) What ideas for a career do you have or would you like to explore?

(F) Photographic Consent

On some occasions the work placement may take publicity photographs i.e. for school publications, etc.

Please tick the box if you do not give your consent?

(G) Medical

If your daughter suffers from any medical problem that may affect her work experience placement (e.g. Asthma, hay fever, back problems, lack of mobility), please give details below.

I hereby give permission for any relevant information to be passed on to the employer.

Parent/guardian's signature Date

(H) Consent

I have discussed with my parents/guardians the categories and areas I have chosen by me for my work experience. I will accept any of the placements given to me in my chosen categories/areas.
If none of my chosen placements are available, I accept that I will have to choose a placement from those available from the database.

Student's signature

Date

As the parent/guardian of the named student on this form, I agree with the category and area choices that she has selected. I agree that she should accept a placement within those areas. I also accept that if none of these are available, she will select a placement from those available on the database.

Parent/Guardian signature

Date

PLEASE COMPLETE BOX (J) ONLY IF YOU WOULD LIKE TO FIND YOUR OWN PLACEMENT – don't forget to tick section B.

(J) Own placement to be arranged by yourself

If you would like to arrange your own placement with a company/organisation not on the database, please complete this section:

Suggested Company/Organisation:

Category (see bright yellow sheets for examples)

I agree to find my own placement providing that it is not already on the School or County Database and will check beforehand. I will also check that the placement has a valid Employers and Public Liability Insurance at the date of work experience.

Student's signature Parents/Guardian's signature

PLEASE NOTE THAT THERE MAY BE A CHARGE TO PARENTS TO CARRY OUT A HEALTH AND SAFETY CHECK FOR PLACEMENTS OUTSIDE THE COUNTY. LONDON PLACEMENTS CHARGE £55.00 PER VISIT AND OTHER COUNTIES MAY CHARGE FEES BETWEEN £30.00 - £45.00. WE REGRET THAT PARENTS WILL BE INVOICED FOR THESE CHARGES SHOULD YOU SELECT AN OUT OF COUNTY PLACEMENT AND THE SCHOOL IS CHARGED FOR THIS SERVICE.

**FORMS MUST BE RETURNED TO MRS HULSE IN H14 OR TO YOUR PSHE TUTOR
BY TUESDAY 29 SEPTEMBER 2009**