



Oxfordshire Work Experience Scheme

PLACEMENT REQUEST FORM

Work Experience Programme 21st – 25th November 2016

Company Name	
Nature of business.	
Address...	
Tel No	Email
Contact Name	Job Title

I can offer the following work experience opportunities to student(s):

No of places	Department	Type of work

We would wish to interview students before the placement YES NO [please circle]

Please specify any health and safety or other restrictions on placement? (e.g. length of placement, age of student)

.....

Our normal hours of work are

Dress requirements are.....

Meal provided/bring own [delete as applicable] Transport provided? YES NO [please circle]

Other comments

.....

I understand that if my organisation is not already registered as an approved work experience provider with the Oxfordshire Work Experience Scheme, before the placement can proceed, I shall be contacted by them to confirm insurance and health and safety arrangements for the student(s).

Signed..... Date.....

NAME..... Job Title.....

Please return to Work Experience Co-ordinator at Wood Green School.