

Work Experience Information Collection Sheet



Your name:

Placement Coordinator: Miss Jones Dates of placement:

Placement Details:

Business Name: Time commitment: Full Time

Objectives of the placement: (e.g. I want to work in the building trades, though I'm not sure what exactly, and I'd like to eventually either be self-employed or run my own company. On this work experience I would like to see the day to day work of being a roofer - doing roofing work, and also how to manage clients and finances.)

Placement contact at business:
Email address of placement contact (*please ensure this is correct*):

Placement phone number: (+44)

Placement Address:

Placement Postcode:

This address is where I will be based for my placement:

I'll be living at home during my placement: Yes:

No:

How will you be travelling to your placement?

Date of Birth:

Do you have any special needs, illnesses, medical conditions, allergies or injuries that may affect your placement?

Yes:

No:

If you answered yes, describe what special needs, illnesses, medical conditions, allergies or injuries you have that may affect your placement.

Parent Name (Also emergency contact):

Parent email address (please ensure that this is correct):

Now upload all these details to the Placements Tool on Unifrog

The Unifrog logo consists of the word "unifrog" in a white, lowercase, sans-serif font, centered within a solid green square.