



IMBERHORNE SCHOOL 2012 WORK EXPERIENCE
ONLY USE THIS FORM IF
THE SCHOOL IS ARRANGING YOUR PLACEMENT

Section A – Your Details

Name of Student Tutor Group

Home Address

..... Post Code

Home telephone number

Home Email Address.....

Section B – Work Placement Details

What type of work would you like? Please circle the choices that appeal to you.

Office Childcare Retail Factory Indoor Outdoor *Other

***If you have circled other please give details of the type of placement you are seeking**

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How far can you travel?

For office use only.

Name of company

Dates of placement

From

To