

Work Experience – Own Placement Form

Cheney School 6th – 10th July 2020

To the student:

This form should be completed neatly in black ink and **signed** by the person who has offered you the placement. This form **must be completed in full (including contact name, email and postcode*)** and returned by the given deadline for you to proceed with the work experience process.

To the employer:

Thank you for offering to host a student from Cheney School for Work Experience. This form tells the school that you have offered a placement to a student. Please complete the form and sign it, so we know that this is a real placement offer

School/College Name	Cheney School	Work Experience dates	6th – 10th July 2020
Work Experience Co-ordinator' name	Mr Davis	School Tel. No.	
Student Name		Form/Tutor group	

Name of organisation offering placement			
Address		Contact's Name*	
Post Code*		Contact's job title	
Telephone No.		Email address*	
Placement job title and/or description			

Placement Confirmation			
<p>I confirm that the student named above has been offered a placement with me/us for the dates stated. I understand I/we will need Employer Liability Insurance in place for the period the student is with me/us. I understand we may be contacted by OxLEP Skills to discuss the placement in further detail.</p>			
Employer signature		Date	
Employer Name		Employer job title	

PLEASE RETURN TO YOUR WORK EXPERIENCE CO-ORDINATOR MR DAVIS NO LATER THAN THE 6TH OF APRIL 2020