

WORK EXPERIENCE PLACEMENT FORM 2021

STUDENT NAME _____

TUTOR GROUP _____

Work experience for 5 days has been arranged from 12-16 July 2021.

A **confirmed** placement has been arranged with:

Name of Company: _____

Contact Name: _____

Capacity in which student will be employed: _____

Employer Address and Postcode:

Employer Telephone Number: _____

Employer Email: _____

My child will travel to and from the placement by: _____

Please note the information will be passed to the employer and East Sussex County Council.

If the chosen placement is out of East Sussex area then the local authority will charge for the mandatory risk assessment. You will be notified by email and the payment will be requested through parent pay.

Signed (parent/carer) _____

Email (parent/carer) _____

Mobile No (parent/carer) _____

Date _____