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|  | **Application Form** **for Work Placement or Experience****at Fairfield Trust** |
| You must complete all sections of the Application Form in black ink or electronically. We will use this form to help us decide on your suitability for a placement. **By completing this application form you agree to your personal data being kept on file after the interview (if applicable) process for 6 months regardless of whether you are successful or not.**  |

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| **About you:** |
| **First name:** |  |
| **Surname:** |  |
| **Date of Birth:** |  | **Age:** |  |
| **Home address and postcode:** |  |
| **Home telephone:** |  | **Mobile telephone:** |  |
| **Email:** |  |

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| **Who supports you that we can contact?** |
| **Parent/guardian/carer or care provider name:** |  |
| **Their address and postcode:** |  |
| **Contact telephone:** |  | **Email:** |  |
| **Emergency contact name:** |  | **Telephone and email:** |  |
| **Care provider (if in supported living):** |  | **Telephone and email:** |  |
| **Social worker or SEND Lead Worker:** |  | **Telephone and email:** |  |
| **School/College Key Contact name:** |  | **Telephone and email:** |  |

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| **What course are you undertaking (if you are at school/college)?** |  |
| **Your previous experience of working in this area (if any):** |  |
| **What experiences are you keen to explore (café, kitchen, animals, maintenance)?** |  |
| **What are you hoping to get from this placement?** |  |
| **How can we best support you?** |  |
| **Please give details of any safeguarding incidents** |  |
| **How long do you need your placement to be, please state preferred days/times?** |  |

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| **Do you have any medical conditions we need to know about?** | **Yes** | **No** |
| **If yes, please provide details of conditions, medication and how we can support you:** |
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| **General Declaration**To the best of my knowledge the information that I have provided on this form is correct. I understand that work experience undertaken at Fairfield Farm Trust does not confer employee status: |
| **Signed:** |  | **Date:** |  |
| **Print name:** |  |
| **For Applicants aged under 18 years, parent/guardian must give consent for you to work with us:** |
| **Signed:** |  | **Date:** |  |
| **Print name:** |  |

**Please note:**

* **There may be a charge for your placement, this will be confirmed with you.**
* **You will be expected to attend as agreed, we will be in contact with your school/college about your performance.**
* **It is assumed that we can use any images or videos of you working at the Trust on our website, social media and for advertising, unless you tell us that you do not want us to do so.**

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| **References** |
| Please provide details of two referees who can comment on your suitability to undertake work experience:  |
| **Referee 1**  | **Referee 2**  |
| **Name:**  | **Name** |
| **Relationship to applicant:**  | **Relationship to applicant:** |
| **Position:**  | **Position:**  |
| **Address:** | **Address:** |
| **Telephone:**  | **Telephone:** |
| **Email:**  | **Email:**  |