

Application Form for Work Experience

Individual, Parent and Teacher Agreement to City Council Requirements - Confidential

This form should be completed after you have filled in the work experience application online form

Placement Information	
Return Form to	Human Resources
	City Offices, Colebrook Street
	Winchester, Hampshire
	SO23 9LJ
Scan and E-mail To	HResources@winchester.gov.uk

Student Details	
First Name	
Surname	
Name of School/College/University	

Individual, Parent and Teacher Agreement to City Council requirements

1. The City Council places considerable importance on the need for attention to Health and Safety at work. You have the responsibility to acquaint yourself with the safety rules of the work place, to follow these rules and make use of facilities and equipment provided for your safety. It is essential that all accidents, however minor, are reported.
2. The City Council will also expect you to observe other rules and regulations governing the workplace which are drawn to your attention. Please note that there is a No Smoking Policy covering the whole working environment and that there are security arrangements applicable to most locations.
3. The City Council fully supports equal opportunities in employment and opposes all forms of unlawful or unfair discrimination on the grounds of ethnic origins, gender, disability, age, religion or sexuality.
4. There will be no payment for meals or travelling expenses.

I have read and understood the above requirements.

Signed: _____

Print Name _____

Please obtain the following signatures: (if under 18yrs.)

Parent/Guardian

I have read the work experience/observation programme information and understood the requirements. I will ensure the student carries out these obligations and confirm that he/she is not suffering from any complaint, which might create a hazard to him/herself or to those working with him/her. I give permission for my son/daughter to attend the course and observe during his/her visit to Winchester City Council.

Signed: _____

Print Name _____

Date: _____

School Careers Advisor (if under 18 yrs):

I have read the work experience programme information and give permission for _____
_____ to attend the course and observe during his/her visit to Winchester City Council.

I also confirm that he/she is currently studying at _____

Signed: _____

Print Name _____

Date: _____