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| East Devon District Council  Work Experience Application form for School Years 10-12 |  |

## Section 1: About You

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| Full Name: |

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| --- | --- |
| Address  (including post code) |  |
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| --- | --- | --- | --- |
| Phone Number : |  | Email |  |

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| --- | --- | --- | --- | --- |
| Name of educational establishment: |  |  | SchoolYear : |  |

|  |  |
| --- | --- |
| School Career Lead Name & e-mail |  |

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| What are you currently studying? |  |

## Section 2 : Personal Statement

Please tell us why you would like a work experience placement with East Devon District Council? (Max 250 words)

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| Please tell us what you hope to gain from the work experience placement? |
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| Please tell us what your career aspirations are? |
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| Please tell us if you have had any previous work experience for example a weekend job and what your tasks were? |
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| --- | --- | --- | --- |
| Signed |  | Dated: |  |

Thank you for your work experience application - please return this form to HR@eastdevon.gov.uk