



WORK EXPERIENCE APPLICATION FORM & MEDICAL INFORMATION

This form should be returned to Mrs Peters (3Rs Office) by Friday 19th October 2018

Parental consent

Pupil Name: _____ Tutor Group: _____

Address: _____

Tel No: _____

I give my permission for the above named pupil to attend Work Experience on the relevant date below (please tick ✓):

R32, R34 (3Rs lesson MonA P3-4 / TuesB P1-2): Work Experience 13th - 17th May 2019

R31, R33 (3Rs lesson FriA P3-4): Work Experience 20th - 24th May 2019

Parent Signature: _____

Date: _____

Please print an emergency contact name: _____

Contact number: _____

Pupil agreement

I agree to the conditions of Work Experience, have made a note of my allocated week and understand that deadlines are very important and need to be met.

Pupil Signature: _____

GREAT TORRINGTON SCHOOL
Medical Information/Risk Assessment



NameTutor.....DoB.....

To the Parent/Carer

Does your daughter/son have a health problem in any of the following areas **which would affect them doing their work experience placement?** (Please tick)

- Restrictions for normal physical activity or games
- Skin allergies, eczema, other allergies (e.g. nuts)
- Bronchitis, asthma, chest complaints
- Hearing problems or ear discharge
- Heart disease that affects their ability to do physical tasks
- Diabetes
- Fits or fainting attacks
- Significant colour defect or other visual problems
- Learning disability which may cause them not to understand instructions
- Any other health problem (including need for regular medication) (Please give details)
- There are no health reasons affecting my daughter's/ son's ability to take this placement
- My child's tetanus injections are up to date – date of last tetanus jab.....

(N.B: It is recommended that all pupils have up to date tetanus injections, especially those undertaking placements within the agricultural industries)

SIGNED.....Parent/Carer Date.....

N.B: This health declaration will be sent to the employer at the work experience placement if there are any relevant health concerns the employer should be aware of.