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

## Section 1: About You

|  |
| --- |
| Full Name: |

|  |  |
| --- | --- |
| Address (including post code)  |  |
|  |

|  |  |  |  |
| --- | --- | --- | --- |
| Phone Number : |  | Email |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name of educational establishment: |  |  | School Year : |  |

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

|  |  |
| --- | --- |
| 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)

|  |
| --- |
|  |
| Please tell us what you hope to gain from the work experience placement? |
|  |

|  |
| --- |
| Please tell us what your career aspirations are?  |
|  |

|  |
| --- |
| Please tell us if you have had any previous work experience for example a weekend job and what your tasks were? |
|  |

|  |  |  |  |
| --- | --- | --- | --- |
| Signed  |  | Dated: |  |

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