LAVALLA
CATHOLIC COLLEGE
STRONG MINDS COMPASSIONATE HEARTS

Work Experience Application Form -

School Advertised Opportunities

This form is to be used when applying for a Year 10 work experience opportunity advertised by the Careers Office.

Section A. Student Details

Student Name: _____ LA: _____

LA Teacher: _____

Section B. Employer Details

Name of Employer: _____

Industry / Job type you are interested in: _____

Date of requested work experience week (please tick):

❑ Work Experience Week A ❑ Work Experience Week B ❑ Alternative date

If Alternative date, please specify the dates here: From ____/_____/2018 to ____/_____/2018.
Any applications for an alternative date will require additional school approval.

Section C. Student to complete a full paragraph answering each question below.

Why you are interested in this opportunity?

Why do you believe you would be a suitable candidate to attend this business? (eg. Behaviour, reliability, maturity etc.)

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Section D. Student Agreement

By signing below the student understands that submission of this form does not guarantee the student the position. All applications submitted to the Careers Office prior to the closing date will be considered for this work experience opportunity.

Incomplete or late forms will not be considered.

The student understands this form may be submitted directly to the employer.

The employer may also decide to cancel their offer of placement due to unforeseen circumstances.

Student Name: _____

Student Signature: _____ Date: __/__/____

Office Use Only:

Date Received: ____/____/____

Name: _____

Signature: _____

Is this application supported by the LA Teacher: ❑ Yes ❑ No

Comment: