



Birmingham Ormiston Academy  
**imagine everything**



Monday 19<sup>th</sup> November 2018

Dear Parents/Carers,

**Year 10 Work Experience Programme 2019**

I am writing to advise you of the upcoming deadline for return of completed Work Experience Placement Forms.

As outlined in the work experience letter you received in September, it is expected that all students take responsibility for organising their own work experience placement for the week commencing Monday 25<sup>th</sup> February to Friday 1<sup>st</sup> March 2019

Earlier this term, all students attended a Work Experience assembly and were provided with guidance on finding a placement and a CV pack to support this process.

Students have also received guidance on accessing the Work Experience Database for potential placement providers. Further information on how to access this can be found below:

Website: <https://sipseducation.work-experience.co.uk>

Username: **boastudent**

Password: **pupilwex123**

Please find enclosed a further copy of the Work Experience Placement Form. Please use this form to record the student's details, employer's details and to provide your consent for your son/daughter to participate in the work experience programme.

As soon as a placement is confirmed, please return the completed form to me at the address below or directly to room 4-09.

This must be completed and returned by **Friday 14<sup>th</sup> December 2018** to enable us to make contact with the provisional placement provider and to ensure that the relevant health and safety checks are made.

Please do not hesitate to contact me on the details below should you have any questions.

Thank you for your support with the work experience programme.

Yours faithfully,

Emma Rickard

Emma Rickard  
Progression Officer

t. 0121 359 9322

e. [emma.rickard@boa-academy.co.uk](mailto:emma.rickard@boa-academy.co.uk)

1 Grosvenor Street, Birmingham, B4 7QD

email: [info@boa-academy.co.uk](mailto:info@boa-academy.co.uk)

tel: 0121 359 9300

web: [www.boa-academy.co.uk](http://www.boa-academy.co.uk)

: @ImagineBOA

: [www.facebook.com/imagineBOA](https://www.facebook.com/imagineBOA)

## Work Experience Placement Form

<u>Student Details</u>	
Name:	
Form Group:	
Pathway:	
Address:	
Telephone Number:	
Medical (please give details of any medical conditions/disabilities)	
Career Interests and Personal Qualities/Strengths/Skills:	
<u>Organised Placement Details</u>	
Name of Business:	
Contact name and position:	
Address:	
Telephone Number:	
Email Address:	
Dates of placement:	
Working hours:	Start: Lunch: Finish:
Type of work:	
Does the employer hold Employers' Liability Insurance (ELI)?	
Preliminary Visit/Interview required?	
Additional Info:	

### Parental Consent

I give permission for my son/daughter to participate in the work experience programme from Monday 25<sup>th</sup> February to Friday 1<sup>st</sup> March 2019.

Signed: ..... (Parent/Guardian)      Date: .....

Please print name: .....

**Please return completed form to Miss. Rickard (Room 4-09) by  
Friday 14<sup>th</sup> December 2018**