

Dear Parents/Carers,

### Year 10 Work Experience Programme 2018

During the week commencing Monday 26<sup>th</sup> February to Friday 2<sup>nd</sup> March 2018 all year 10 students will be afforded the opportunity to experience the world of work by spending one week with an employer.

As outlined in the work experience letter you received in your BOA information pack, it is an expectation that all students take responsibility for organising their own work experience placement.

Over the forthcoming months we advise students to discuss possible placement opportunities with you and of course with their form tutors. We would like to encourage you to actively begin the process of contacting employers. Additionally, as Progression Officer, I will provide further support if necessary.

All students have been provided with guidance on finding a placement and a CV pack to support this process.

Enclosed is a Work Experience Placement Form. Please use this form to record the student's details, employer's details and 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 Miss. Rickard at the address below or directly to room 4-09.

This must be completed and returned by **Friday 15<sup>th</sup> December 2017** to enable us to make contact with the provisional placement provider and to ensure that the relevant health and safety checks are undertaken.

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  
Progression Officer  
t. 0121 359 9322  
e. emma.rickard@boa-academy.co.uk

## 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:	
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 26<sup>th</sup> February to Friday 2<sup>nd</sup> March 2018.

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

Please print name: .....

**Please return completed form to Miss. Rickard (Room 4-09) by  
Friday 15<sup>th</sup> December 2017**