 Work Experience Application Form

***Name:***

***D.O.B:***

***Address:***

***Email:***

***Contact number:***

***College attended and year group:***

***Dates of placement From To***

***School/College subjects studied (if applicable)***

***Any other relevant qualifications / certificates etc.***

***Why would you like to come to Derby Theatre for your work placement?***

***What do you think you can bring to a placement here? (Skills, experience, interests)***

***What skills would you like to gain from this placement?***

***Our placements are across all departments. Do you have an interest in a particular department/s?***

***Do you have any access, medical or learning needs that we should be aware of?***

***This information helps us to make your placement safe and valuable***

Signed Print Name

***Referees***

***Please provide the names of two adults who may be able to provide you with a reference. These should not be family members. Referees might be teachers, youth group leaders, employers***

Referee Two

Name:

Job title:

Contact details (email preferred)

How do they know you?

Referee One

Name:

Job title:

Contact details (email preferred)

How do they know you?

**If your application is successful, you will be invited to an interview.**