

Work Experience Request Form

Please complete and return this form via email to learninganddevelopment@watford.gov.uk

If you have a CV you may wish to also submit this too.

Placement	
What type of work-based experience are you interested in	
Dates placements required (maximum of 2 weeks)	
Do you have any access needs or disability accommodations you would like us to know about?	
Section A: Personal Details	
First name	
Surname	
Age	
Home Address	
Home Telephone Number	
Mobile Telephone Number	
Email Address	
Name of Educational Establishment (if applicable)	
Emergency Contact Details Name, Address, Phone number	
Section B: Your qualifications or vocational experience	
Qualifications achieved or studying towards	

Brief description of why you are interested in a placement with Watford Borough Council and what you hope to learn from the experience	
Section C: Declaration	
I consent to Watford Borough Council capturing and storing the personal details in this form for providing the service requested. I understand that I can request for my details to be removed from your records.	Please delete as appropriate Yes / No
Please return the form via email, using an electronic signature.	
Signed:	Date:

