**Work Skills Experience Application Form- 1**

**Practice Coordinator: Adam Boyes**

**🕿 0113 3431262 🖂 Adam Boyes** **a.j.boyes@leeds.ac.uk**

**Student Opportunity and Enhancement, Owen Radford-Lloyd**

**🕿 0113 343 8470 🖂o.lloyd@adm.leeds.ac.uk**

**Student Education Service Officer – Placement Unit - Jayne Tasker**

**🕿 0113 3431174 🖂** **placements@healthcare.leeds.ac.uk**

|  |  |
| --- | --- |
| Student Name |  |
|  |  |
| Social Work | **(BA)**  | **(MA)**  |

|  |  |  |
| --- | --- | --- |
|  | (Term Time) | (During Vacation) |
| Contact Address |  |  |
| Postcode |  |  |
| Telephone Number |  |
| Mobile Number |  |
| University Email Address |  |
| Date of Birth |  |
| *\*Please delete the following as applicable* |
| Gender | MALE | FEMALE |
| Do you have language skills other than English?If yes please provide details. |  |
| Do you have a current UK driving licence? |  |
| Will your insurance cover you for business & transporting others (i.e. colleagues & service users) |  |
| How will you travel to and from Work place experience\*Please delete as appropriate |  A CARPUBLIC TRANSPORT |
| How will you be travelling whilst on Work place experiences\*Please delete as appropriate | A CARPUBLIC TRANSPORT |

**PREVIOUS EXPERIENCE and LEARNING**

|  |
| --- |
| What skills, qualifications, knowledge and experience will you bring to a Work place experience, please include:* relevant life experiences
* relevant work experiences (paid or unpaid)
* any previous Work place experiences – including details of service groups
* other relevant training (with dates)
* what have you learned from the experiences that will help you on your Work place experience
* higher education qualifications and date achieved.

**(Min 250 words – Max 300 words)** |
|  |
| Are there any other particular circumstances which you wish to be taken into consideration in matching you to a Work place experience? |
| If you have specific child care or other caring responsibilities please state very clearly the hours you are available. Agencies will expect you to work an eight hour day although there will be some flexibility at each end of the day if required so long as you are working the required hours  |

Signature: Date:

Tutor Confirmation

Signature: Date:

**Deadlines:**

**Complete and sent to tutor by ??/??/??.**

**After it has been checked by your tutor email to** placements@healthcare.leeds.ac.uk **by 12 noon ??/??/??. Subject: BA1 Social Work - Work Place Experience Application Form**