

Application for work experience with Argyle Community Trust

NAME:

AGE:

DOB:

HOME ADDRESS:

POST CODE:

HOME TEL NO:

MOBILE TEL NO:

EMAIL ADDRESS:

MEDICAL CONDITIONS:

EMERGENCY CONTACT:

TELEPHONE:

SCHOOL:

SCHOOL NO:

SCHOOL YEAR:

AREA YOU WOULD LIKE TO WORK (please highlight):

PLYMOUTH EAST CORNWALL (Liskeard, Saltash etc)

NORTH DEVON (Holsworthy, Bude etc) CORNWALL

DATES REQUIRED FOR WORK EXPERIENCE:

WHY YOU WOULD LIKE TO WORK WITH ARGYLE COMMUNITY TRUST:

HOBBIES AND INTERESTS:

FURTHER INFORMATION ABOUT YOURSELF:

STUDENT SIGNATURE:

DATE: