



Work Experience Parental Consent



GENERAL INFORMATION

- Work experience is an important, as well as exciting, part of developing as a person and gaining work-life skills.
- In order for us to help you, **all students must fully complete this form**, including the signed declaration from a parent/carer.
- **Return the signed parental consent form to school by Friday, 31st January 2020.**

STUDENT DETAILS

First Name:

Surname:

Emergency Contact Name:

Emergency Contact Telephone Number:

Emergency Contact E-mail:

SCHOOL DETAILS

School:

Hinde House 2-16 Academy

Form Group:

Placement Dates:

Monday, 7th September - Friday, 11th September 2020

HEALTH, WELL-BEING, SPECIAL EDUCATIONAL NEEDS

**Please inform us of any medication, health conditions, special educational needs or issues that may affect your child's work experience placement. This information will be used by the employer and Opportunity Sheffield team members when completing the health & safety risk checks of the placement.*

PARENT/CARER CONSENT

'As the parent/carer, I agree to my child taking part in work experience. I understand that as the parent/carer it is my duty to supply any relevant medical/health issues or special educational needs to my child's school, Opportunity Sheffield, and the Employer, which could affect my child's safety whilst on placement. By signing this form, I agree with all the information given in the **Health declaration** above'

Name:

Relationship:

Signature:

Date: