



Work Experience/Placement Application Form

Please complete and return this form to the City of Salisbury's People & Culture Division via email rconnor@salisbury.sa.gov.au

PLEASE NOTE: All requested documentation must be included with the submission of this form otherwise your application can not be progressed.

STUDENT DETAILS

Name		Date of Birth	
Home Address		Post Code	
Contact Phone			
Email Address			

EMERGENCY CONTACT DETAILS (PARENT/GUARDIAN IF UNDER 18)

Name		Relationship	
Contact Phone			

DETAILS OF SCHOOL/EDUCATIONAL INSTITUTION

Name of School or Institution			
Course of Study			
Is a placement a course requirement?	Yes/No	Year of Study	
Contact			
Email Address			

PREFERRED PLACEMENT DATES (Please list 3 options in order of preference)

PLEASE NOTE: All completed applications must be received by the City of Salisbury within four weeks of the requested dates to allow sufficient time for a placement to be organised. City of Salisbury will endeavour to respond to applications within two weeks of receipt.

Number of Hours/Days Required	
Preference 1 Dates	
Preference 2 Dates	
Preference 3 Dates	

DETAILS OF DESIRED WORK PLACEMENT

Please provide as much information as possible to ensure your application is forwarded to the correct area.

Please outline your career/education aspirations
What interests you about a placement within City of Salisbury
What do you hope to achieve/learn from a placement with the City of Salisbury
Which area are you interested in? Why are you interested in this area? And why do you believe this area is important for the community?
Please describe (or attach) any assessment criteria/process you are required to undertake as part of the placement (if applicable)
Please provide details of any medical conditions, allergies, medications, disability or other factors City of Salisbury should know about

PARENTAL/GUARDIAN PERMISSION

Is the student under the age of 18?	NO YES (please complete signatory section below)
Name of Parent/Guardian	
Signature of Parent/Caregiver	
Contact Details	

STUDENT DECLARATION

- I will perform my duties during the placement to the best of my ability, support workplace health and safety requirements and comply with all reasonable directions of the City of Salisbury.
- I will inform both the City of Salisbury and educational institution as soon as possible if I am unable to attend the workplace and will inform my placement supervisor promptly of any injury, accident or incident that may occur.
- If I have access during the placement to information which is private and confidential, I will not convey this information to any person outside the City of Salisbury.

Student Signature: _____ Date: _____

NEXT STEPS

- Once your application has been received by People & Culture, you will receive notification.
- If you are successful in securing a placement, you will be contacted by the People & Culture team and asked to provide a copy of a Workplace Learning Agreement. This must be signed by all parties prior to commencing your placement.