



## Work Experience/Placement Application Form

Please complete and return this form to the City of Salisbury's People & Culture Division via email [RPandya@salisbury.sa.gov.au](mailto:RPandya@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.

<b>Number of Hours/Days Required</b>	
<b>Preference 1 Dates</b>	
<b>Preference 2 Dates</b>	
<b>Preference 3 Dates</b>	

**DETAILS OF DESIRED WORK PLACEMENT**

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

<b>Please outline your career/education aspirations</b>
<b>What interests you about a placement within City of Salisbury</b>
<b>What do you hope to achieve/learn from a placement with the City of Salisbury</b>
<b>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?</b>
<b>Please describe (or attach) any assessment criteria/process you are required to undertake as part of the placement (if applicable)</b>
<b>Please provide details of any medical conditions, allergies, medications, disability or other factors City of Salisbury should know about</b>

### PARENTAL/GUARDIAN PERMISSION

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

### 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.