

# Work Experience Application



This form has been designed to obtain relevant information that relates directly to work experience with Redland City Council. All information you provide to Redland City Council will be kept strictly private and confidential.

## PERSONAL DETAILS

Salutation			
First name			
Surname			
Date of birth			
Address			
Suburb		Post code	
Mobile		Home phone	
Email			
Emergency Contact Name		Number	
Please list any current qualifications you hold and the date of completion:			

## PLACEMENT DETAILS

School of enrolment			
Area/s of interest			
Is there a time requirement for the placement? (e.g. 10 days or 80 hours)			
Placement time frame (e.g. 5 January to 5 March)			
Availability (Please note: a standard work day is 8:30am till 4:30pm)	Start	Finish	Unavailable dates
	Monday	till	
	Tuesday	till	
	Wednesday	till	
	Thursday	till	
	Friday	till	
	Saturday	till	
	Sunday	till	

I certify that all information I have provided in this application is true and correct.

Name:  
(please print)

Signature:

Date: