Volunteer/ Work Experience Information Request

Please complete this form and return it to Wingrove Primary School for the attention of Miss Sadaf Chaudry. Please allow at least 2–3 weeks for a response.

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| Title and name:  | Date of birth:  |
| Your email address:  | Your home address and post code:  |
| Your telephone number:  | School/College/University/Work Place:  |
| Placement required: (please select)Volunteer or work experience | Preferred key stage or year group:  |
| Days you are available in school: Monday AM/PM, Tuesday AM/PM, Wednesday AM/PM, Thursday AM/PM, Friday AM/PMPlease note times:Morning sessions start at 8:45am and finish at 12noon.Afternoon sessions start at 1pm and finish at 3:15pm. |
| Languages spoken:  | Any additional information/needs you may require:  |
| Do you have any family members working in or attending the school? (please list) | Do you have a specific time frame or dates to attend within the school calendar? |
| Please provide a brief summary of your experience of working with children/young people and the skills you will bring to the sessions within our school:  |
| Signed:  | Date: |