

Boroondara Tertiary Work Experience Request Form

Placement Request			
Department / Area of interest			
Dates requested*	Choice 1:		
	Choice 2:		
* Please indicate when you are required to undertake your placement above. If the placement period is flexible then please list a second timeframe. Please provide at least 6 weeks-notice			
Flexible with dates?	<input type="checkbox"/>	Yes	<input type="checkbox"/> No
Full time for this period?	<input type="checkbox"/>	Yes	<input type="checkbox"/> No
If not full time, number of days/hours per week (availability)			

Personal Details	
Student Name:	
Home Address:	
Contact Number:	
Email Address:	
Special Requirements:	

Insurance	
Personal injury insurance covered by:	
<input type="checkbox"/>	<i>I have attached a photocopy of my personal injury insurance</i>

Educational Institutional Details	
Educational Institution:	
Address:	
Course of Study:	
Year of Study (e.g. 1 st / 2 nd year, etc)	
Program Contact:	

Educational Institutional Details (Cont.)

Contact Number:

Email Address:

Student Declaration

I have read, understood and agree to abide by the conditions stated on the first page if offered a work experience placement at the City of Boroondara

Student Signature:

Date:

Educational Institution Endorsement

I endorse the above students request for work experience at the City of Boroondara and confirm that appropriate personal injury insurance coverage exists for this placement (a copy of which is attached)

Endorsee Signature:

Date:

Name and Title:

(Name and position title of person giving endorsement on behalf of the educational institution)

Contact Number:

Please send this completed form and attachment/s to the [People, Culture and Development](#) team

More information about what to include and the process can be found on our [website](#)

Office Use Only (People, Culture and Development)

Request Accepted:

Yes

No

Supervisor for placement:

Date from:

Date to:

Special instructions:

Confirmation letter / email sent on (date):

Signature