



Application for Voluntary Work Experience Placement

Name	
Address	
DOB	
Telephone number	
E-mail	

	Yes	No
Have you previously worked at Droylsden Academy?		
Are you a previous Droylsden Academy student?		
If yes, when did you leave? (Please note we are unable to offer a placement if you have left within the past 3 years)		
Do you have a current enhanced DBS check?		

Desired dates of placement	
Desired length of placement	

Please give **details of the nature of the placement** you are seeking (in the box below)(e.g. specific department/ lesson observations/ teaching experience etc.)

Please submit a **supporting statement** (on the reverse of this form) to include:

- Your reasons for seeking this placement
- Current and previous education, training and experience
- Any skills you feel you can bring to the school
- Reasons why you have chosen our school
- Your motivation for wanting to work with young people

Supporting Statement:

Signed: _____ **Date:** _____

