

Personal details

Mr/Mrs/Miss/Ms		Address (inc post code)	
Surname:			
First Names:			
Date of Birth:			
Age:		Telephone	
Mobile:		Email:	
Emergency Contact Name and Number			

Placement applied for

Area of Interest	Dates available for placement (inclusive)	Length of Placement

School/college (if applicable)

Name of School / College:		Subjects being studied:	
Telephone Number			
Name of Work Experience Co-ordinator:			
Year Group (you will be in when undertaking wex):			

What are your hobbies and interests?

Please give us a brief summary of why Cavendish Nuclear, the nuclear sector, engineering/ a career in STEM appeals to you.

Please list 3 – 4 key objectives you wish to achieve whilst undertaking a work experience placement (examples of this might include, to develop your confidence in a professional context, to learn specific skills such as communication skills or customer service skills etc)

Health

Do you have any disabilities or health problems we should be made aware of?	Yes/No
If yes please give details including any special requirements:	

Please ask your parent/guardian to complete this section (if applicable)

I understand the nature of the work experience placement(s) applied for and give consent for to undertake this placement:	(name of young person)
Signed:	Parent / Guardian (delete as appropriate)

Please provide details of any family members who currently work for Cavendish Nuclear (if applicable)

Name:		Office/site location:	
Department:			

Thank you for completing this application form. We will endeavour to respond to you within 4 weeks of receipt of your completed form.

Signature of student	Date
----------------------	------