

Application for Work Experience or Voluntary Placement

Personal Details	
Surname	Title (eg Mr, Mrs, Miss, Ms):
First name/s:	
Home Address:	
	Post Code
Date of Birth:	Tel No:
Email Address:	
Riverside School is commit	ted to Equal Opportunities. If you consider that you have a placement at Riverside School, please provide details of any whilst on site:
Start date of placement req	quested:
End date of placement requ	uested:
Day(s) per week requested	(please tick): Mon Tues Weds Thur Fri
Site (please tick preference):	St Paul's Cray Beckenham West Wickham Phoenix
Phase preferred?	Primary Key Stage3 Key Stage 4/5

Please tick type of placement requested: Voluntary Work Experience Please note that we can only support volunteer placements for over 18s. Please state below why you would like to do your placement at Riverside School:						
How did you hear	r about Riverside School?					
	committed to protecting the pr lunteers can be found on our			ation. A copy of our		
DBS Number (if held)						
Childcare Disqual	lification Requirements					
statutory guidance	r Education has issued supple and details a new requirement ng in schools and academies	nt for childcare disqua				
	l letter and Keeping Children olunteer Declaration. This d					
Please note that be references.	fore a voluntary placement c	an be confirmed, we v	vill to see your ID a	and seek		
Signature:		Da	ate:			
Please complete for by post to:	ully and return a signed co	py by email to <u>place</u>	ments@riverside.b	oromley.sch.uk or		
Riverside School, Main Road, St Paul's Cray, Orpington Kent BR5 3HS	Volunteer Placement Co-O					
Office Use Only Ack date	Approved Signature		Class Allocated			