



Noosa District State High School

Year 10 Career Education Program

Please complete the Personal Details section and Work Placement Details below. Return this form to the Administration Office no later than **Thursday, 19 April 2018**.

Remember, this is **your** work experience – don't waste this fantastic opportunity!

Work Experience is a 6 day program - **Friday, 22 June 2018 – Friday, 29 June 2018**.

PLEASE WRITE CLEARLY

PERSONAL DETAILS:

Name: _____ Home Group: _____

Address: _____

Emergency Number: _____ Date of Birth: _____

Work Experience Registration Form WORK PLACEMENT DETAILS:

NAME OF BUSINESS: _____

Name of Manager/Supervisor: _____

Contact Person at Business: _____

Phone : _____ Email: _____

Street Address: _____

Work Experience Industry: _____

PARENT/GUARDIAN APPROVAL (please sign): _____

Please return to the Administration Office by Thursday, 19 April 2018.