

**CHATSWORTH SETTLEMENT TRUSTEES**  
**APPLICATION FOR WORK EXPERIENCE**

**2010**

**PERSONAL DETAILS**

NAME ..... DATE OF BIRTH .....

ADDRESS .....

.....

TEL. NO. .... EMERGENCY TEL. NO. (*if different*) .....

NAME OF SCHOOL .....

SCHOOL CONTACT ..... SCHOOL TEL. NO. ....

**WORK EXPERIENCE APPLICATION**

**CHATSWORTH DEPARTMENTS – IN ORDER OF PREFERENCE**

*Catering, Domain (parkland), Estate Office (17 or over with a driving licence), Farm Shop, Farmyard & Adventure Playground, Farms (working farm i.e. cattle & sheep), Gardens, Gymnasium (16 & over), Retail Sales*

1. .... 2. .... 3. ....

**DATES OF WEEKS APPLIED FOR (*Monday to Friday*)**

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**HAVE YOU ANY INTERESTS RELEVANT TO THE WORK EXPERIENCE? IF SO, PLEASE TELL US ABOUT THEM BELOW**

**HAVE YOU ANY SPECIAL NEEDS TO BE CONSIDERED? I.E. ANY ALLERGIES/PREVIOUS OR EXISTING MEDICAL CONDITIONS/DISABILITIES THAT WE NEED TO CONSIDER WHILST YOU ARE IN OUR EMPLOY. IF SO, WHAT ARE THEY?**

**PLEASE TELL US A LITTLE ABOUT YOURSELF AND CONTINUE ON THE BACK OF THIS FORM IF YOU NEED TO**