Our Ref: CMH/LDE

October 2019

Dear Parent/Carer

**Confirmation of Placement**

If you have received this letter you will have been approached by a parent/carer of one of our Year 10 students to support with organising their child’s work experience placement.

I would like to know if you could offer any work experience placements to our Year 10 students, for the week beginning **13th to 17th July 2020**? If this is possible, I would be most grateful.

If you are able to help us, please confirm the details required below to our student/parent who can complete the form and return, or e-mail the details to me at:

CMeredith@q3academy.org.uk

All placements require Health and Safety checks which will be completed by an external provider in order to ensure that employers have the appropriate **public liability** and **employer’s liability** insurance.

Thank you for taking some of your time to help us. Our students will be in touch prior to the work experience date, and I hope to visit you in July 2020.

Name of firm/business ………………………………………………………………………………..

Address …………………………………………………………………………………………………

……………………………………………………………………………………………………………

Tel No ……………………………… E-mail address ……………………………………………….

Contact Name(s) ………………………………………………………………………………………

Name of Student ………………………………………………………………………………………

Type of work involved …………………………………………………………………………………

Thanking you in anticipation



Mrs C Meredith

**Aspirations, Careers & Employability Ambassador**