

# Application Form



To undertake work experience at City of Marion please complete this application form.

We require a minimum of four weeks to arrange your work experience placement from the date this application (including proof of insurance) is received.

All applications will be considered, however as work experience requires close supervision of participants, this must be balanced with council's operational requirements so all work experience will be at the discretion of the City of Marion.

## STUDENT TO COMPLETE

Click on boxes to enter text OR print and complete the form by hand

Student first name:  Surname/Family name:

Postal address:

Suburb:  Postcode:

Day time phone number:  Date of birth:

Email address:

Do you identify yourself with any of the following:

Aboriginal or Torres Strait Islander: Yes  No

Person with a disability or impairment: Yes  No

If yes, please state if special requirements may be needed for the work area:

## EMERGENCY CONTACT

Emergency contact name:  Phone number:

## EDUCATIONAL DETAILS

**CURRENT - High School** Yes  No  Year level:

School name:

School address:

Work experience co-ordinators name:

Co-ordinators telephone number:

Co-ordinators email:

## OR CURRENT Place of Tertiary Education

**TAFE** Yes  No  Qualification currently being studied:

**University** Yes  No  Qualification currently being studied:

Is your request for placement a requirement of your course/ university? Yes  No

**Other**  Please indicate why you are requesting work experience?

## WORK EXPERIENCE DETAILS

**Preferred dates** From:  To:

Preferred number of hours/days per week:

What type of work experience (job role) are you interested in? (in order of preference)

1.

2.

Briefly describe what interests you about this work and what you would like to learn during your placement and why? Please include any relevant qualifications that are currently being studied or have been completed.

**I certify that the above information is true and correct:**

**Student's signature:** ..... **Date:** .....

## INSURANCE

**All work experience participants are required to be covered by the following insurance:**

- Indemnity / Public Liability

**Please note:** Placements will not be confirmed until proof of insurance or the Education Institution Workplace Agreement Form is signed by the School/University/TAFE, Student and provided to City of Marion.

## SUBMIT YOUR APPLICATION

Please forward your completed City of Marion Work Experience Application Form and Education Institution Workplace Agreement Form (if your application is accepted) to:

**Mark:** Attention: Yvette Zaric

**Email:** [employment@marion.sa.gov.au](mailto:employment@marion.sa.gov.au)

**Post:** City of Marion, PO Box 21, Oaklands Park SA 5046

For more information please contact Yvette Zaric, Human Resources Coordinator on phone 7420 6418.