

Work Experience Placement Form – Office of Rebeca Smith MP

Section One – Personal Details

First name(s):

Last name(s):

Date of birth:

Address:

Mobile:

Email address:

Next of Kin/Emergency Contact

Please provide details of your next of kin or an emergency contact person whom we may contact in the event of an emergency during your placement:

First name(s):

Last name:

Relationship:

Mobile/telephone number:

Section Two – Education and Learning

Please provide details of the subjects you are currently studying and those you have completed. Include current place of study (if applicable) school/college/ university:

Section Three – Skills and Experience

Use this section to tell us more about yourself and why you would like to undertake a work experience placement with a Member of Parliament.

What would you say are your strongest skills, and what are skills that you would like to develop through work experience in the constituency office/Westminster?

Section Four – Dates and Practicalities

In this section, please give an indication of when you are available/unavailable and when you would like to complete your work experience. Be as specific as possible.

Do you have any accessibility requirements or additional information you would like us to be aware of (including any allergies)?