**Students Name -**

**Date Form Completed –**

|  |  |
| --- | --- |
| **Information Required** | **Placement Information** |
| **Name of Placement/Company** |  |
| **Name of Contact at Placement** |  |
| **Telephone Number of Placement** |  |
| **Placement Address Line 1** |  |
| **Town** |  |
| **Postcode** |  |
| **Main Duties to be carried out at the placement by student** |  |
| **Is this placement on DCC Work Experience website?**  |  **YES NO**  |