



Name of Student		Tutor Group	
School	St Joseph's Catholic School, Laverstock, Salisbury		
Placement period	Monday 24 th June – Friday 28 th June 2024		

Does your child have any medical conditions that the employer needs to be aware of? <i>If yes, please indicate & comment below:</i>	Yes	No
Physical Disabilities Please give details:		
Allergies, e.g. nuts, penicillin Please give details:		
Skin conditions e.g. eczema Please give details:		
Asthmas or any other chest complaints Please give details:		
Hearing / Visual impairments Please give details:		
Heart conditions that affects their ability to do physical tasks Please give details:		
Diabetes / Epilepsy Please give details:		
Medication Please give details:		
Please provide information for any other medical conditions that should be considered (including emotional, behavioural, SEN needs that are relevant to take into consideration for Work Experience placements):		

Parent (This information will be shared appropriately with an employer who is offering a work experience placement).

Signed		Date	
Name <i>(please print)</i>		Relationship to student	

Employer - I have read and acknowledge the health information above and can confirm that I will take the relevant risks into account for this placement.

Signed		Date	
Name <i>(please print)</i>		Position	
Company Name			