

Employer to Complete: return to: lizporter@bridgesprogrammes.org.uk

Any queries call Liz Porter, Employer Engagement Tel: 0141 558 9749

Date Submitted:

Company Name :

Address:

Area:

Post Code:

Contact:

Tel No:

Email:

What is your Business Sector?:

What type of Shadow Placement can interested in?:

eg: Customer Care / Admin / IT / Finance / Maintenance / Gardening / KP / Cleaning / Care Assistant / Warehouse / Pharmacist/Doctor / Teacher/Classroom Assistant / Engineer / Machine Operator / Security etc

How many Shadow Placements are you looking for?:

Will you provide in house training ?: Yes No

If yes what kind of training?:

Are you able to offer: Travel Expenses Yes No Lunch Expenses Yes No

Placement Requirements: PVG Yes No are you able to pay Yes No

How many hours would the placement be? : am pm all day

Days per Week?: Mon Tue Wed Thu Fri Sat Sun

Our standard placement are 2 days per week for 6 weeks

Would you require us to supply Pre Placement Training: Yes No