

Employer to Complete: return to: <u>lizporter@bridgesprogrammes.org.uk</u> 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?:    Yes    Yes
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

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