

Work Experience Request Form

Personal Details

Full Name and Preferred Name:

Email Address:

Which site would you like to complete work experience at:

- ☐ Midlands, TF11 8UP
- ☐ London, NW9 5LL

Educational Information

School/Institution Name:

Staff Name:

Staff Email Address:

Which year group are you in?

Next of Kin Information

Name:

Relationship to you:

Contact Number:

Email Address:

Do you have a personal or familial connection with anyone at the Royal Air Force Museum? If yes, please state details below.

Work Placement Information

Proposed start date:

Proposed end date:

Please state your main area of interest:

Do you require any additional support or reasonable adjustments to complete a placement? For example, accommodations such as extended break times, specialised equipment, or accessibility considerations.

I confirm that the information I have given is true and complete to the best of my knowledge.

If you are under 16, please confirm you have parent/guardian consent for us to hold your personal details on file until your placement has been completed.

Your Signature:

Parent Signature:

Please visit our Privacy Policy to see how we handle data: <https://www.rafmuseum.org.uk/default/privacy-policy/>.

Please return this form to: workexperience@rafmuseum.org

Please note: completing this paperwork is not a confirmation of placement. We endeavour to let applicants know within 10 working days if we can accommodate their request. We would recommend that you make enquiries with other organisations – to avoid disappointment.