WORK EXPERIENCE & INTERNSHIP APPLICATION FORM

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| SECTION 1 – STUDENT INFORMATION |
| **Name** | **Gender****Male**  **Female**  | **Date of Birth** |
| **Address** | **State** | **Postcode** |
| **Telephone number(s)** | **Email Address** |
| **Name of educational institution** | **Grade/Year Level** |
| **Units/subjects you are studying** *(internship applicants please also attach transcript and/or resume)* |
| **Are you from Aboriginal or Torres trait Island descent?****Yes** **No** | **Are you a person with disability?** **Yes** **No****If yes, do you have any special requirements?\_\_\_\_\_\_\_\_\_\_\_\_\_****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Students signature** | **Date** |

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| SECTION 2 – PLACEMENT DETAILS  |
| **Requested placement start date** | **Requested Placement end date** | **Are the dates requested negotiable?** **Yes** **No**  |
| **WORK EXPERIENCE STUDENTS ONLY:** | **INTERNSHIP STUDENTS ONLY:** |
| **Hours per day:** **Standard (School hours)**  **Half days**  **If other please specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **Hours per week:** |
| **What specific areas of the Library are you interested in?** |
| **How do you believe a placement at the Library will benefit your education, personal or career goals?** |

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| SECTION 3 – EDUCATIONAL INSTITUTION INFORMATION  |
| School Work Experience Coordinators or Principles must sign below on behalf of a student. *Do you endorse this student to complete a work experience placement with the National Library of Australia?* **Yes** **No** |
| **Signature**  | **Printed name** | **Date** |
| **Email Address** | **Telephone number(s)** |
| **Name of educational institution** |