

Work Experience Application Form

If possible, please complete electronically. Please write in BLOCK CAPITALS if hand written.

Personal Information			
Preferred Name:	Surname:	Email A	.ddress:
School:	Subjects and Expected Grades:		
Supporting Information			
What is your dream job and why? (150 v	words)		
Why are you passionate about science, a	technology, engineering and/or math	iematics? (150 words)	
Please describe yourself in three words.			
What is your biggest achievement to da	te? (150 words)		
DECLARATION I shall not divulge to any person, firm or company any confidential information relating to the company or its business which I may acquire during the course of this placement. To the best of my knowledge I declare that the statements and particulars in this application form are true and accurate.			
Applicant's Name: Date:		Applicant's Signature:	

Please return forms to workexperiencebas@leonardo.com