**Application for work experience at Godalming Junior School**

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| --- | --- |
| Date |  |
| Your full name |  |
| Your email address |  |
| Your year group |  |
| Your school |  |
| Dates you are available for work experience |  |
| Are you actively considering a career in teaching? |  |
| What do you want to gain from a week’s work experience at Godalming Junior School? |  |
| Do you have a preference to work with any particular year group(s) at Godalming Junior School? |  |