**NDS Work Experience Programme**

**Application Form**

This form will be used to assess applicants’ interest in science and medicine so that the department can offer work experience places to students who will benefit most from working with our researchers. Students are welcome to include a CV if they have one as part of their application.

Please return your completed form by email to Emma Morris ([emma.morris@nds.ox.ac.uk](mailto:emma.morris@nds.ox.ac.uk)) or post to the address at the bottom of the page by 31 March 2017. Students will be notified of placement allocations by 30 April 2017.

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| **Name** |  | |
| **Contact email address** |  | |
| **School** |  | |
| **School work experience coordinator or contact name** |  | |
| **Current year level** |  | |
| **Age you will be at time of placement** |  | |
| **Please indicate your preferred work experience dates** | 10 – 14 July 2017 | 17 – 21 July 2017 |

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| **What subjects are you studying or do you intend to study at A-level?** |
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| **At the moment, what would your dream career be?** |
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| **What skills do you think you need to be a good medical researcher?** |
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| **What skills do you think you need to be a good clinician (medical doctor or surgeon)?** |
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| **What professions, other than doctors and lab scientists, are you aware of that are involved in medical research?** |
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| **Do you have an interest in any specific area of NDS research?** |
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| **Have you undertaken any work experience previously? YES NO**  If yes, please provide details of where, when and what you did during your placement. |
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| **Are you currently doing any part-time or volunteer work? YES NO**  If yes, please provide details. |
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| **Why are you applying to do work experience with NDS and what would you like to achieve during your placement?** |
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