**Mission EmployAble Supported Internship Application Form**

**September 2024 Intake**

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| **Name of Applicant:** | | **Applicant’s Current Home Address:** |
|  | |  |
| **Applicant’s Date of Birth:** | | **Applicant’s Email address:** |
|  | |  |
| **Applicant’s Contact Telephone Number:** | | **Applicant’s previous educational setting and key contact:** |
|  | |  |
| **Parent/Carer Details:** | | **Parent/Carer Address if different from applicants address:** |
| **Name:** | |  |
| **Contact number:** | |
| **Do you have an active E.H.C.P? Please circle** | | **Can you travel independently via SEND taxi, public bus or train to Chorleywood? If so, please list what is currently supported on your EHCP.** |
| Yes | No |  |
| Please attach the most recent copy of your EHCP | | |
| **Please indicate your achievement levels in the following subjects:**  **E.g Entry Level 2 Functional English** | | **Do you want to get a job? If so, tell us what you would like to do for work:** |
| Maths | English |  |
| We would like to get in touch to meet/speak over the phone to assist us to get to know you and mark you across a matrix of eligibility criteria. Please indicate best days/times to get in touch. | | |