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| **Colour - Long**Takeover Day - 20 November 2015 |  |

Takeover Day is your chance to try out someone’s job for the day.

Managers and decision makers from all sorts of organisations across Norfolk will be letting young people, like you, take charge for the day.

**What would you do all day?**

Each job will be different. We are putting together a set of jobs across Norfolk that young people will take on for the day. In the application form we have asked what you are interested in and we will try to match the job you take over with your interests.

You will have the chance to learn more about what people do at work all day and to ask questions. You will get to have a go at parts of their job and see what it is like. You may be asked to help solve a problem that the organisation your with is facing.

**And when is it?**

Friday, 20 November 2015. The placements will vary slightly, but they will start at approximately 9am and you will finish between 4pm and 5pm.

We will do our best to make sure that the opportunities are easy to get to, however if you need help with transport please get in touch and we’ll see what we can do to help.

## Getting involved is easy

**Step 1 -** Have a chat with your parent or carer – show them this pack and make sure that they are happy for you to take part.

**Step 2 -** Talk to your teacher or tutor if you are at school or college and make sure that you get their permission to join in. There is a letter you can show them on our website: [www.norfolk.gov.uk/takeoverday](http://www.norfolk.gov.uk/takeoverday).

**Step 3 -** Complete this application form and send it back to us by **25 October 2015**. Please send your completed application form to: Chris Williams, Norfolk County Council, County Hall, Ground floor, South wing, Norwich NR1 2DH.

**Step 4 -** We’ll look at what you are interested in, find you a placement and let you know where you will be spending the day.

**Step 5 -** Turn up. Get involved. Ask questions. Make the most of it and enjoy the day.

**Got any more questions?**

Please call Chris Williams on 01603 495107 or email chris.williams2@norfolk.gov.uk.

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| **Colour - Long**Takeover Day 2015 application form Your details  |  |

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| First Name ………………………….…... Surname ….…….….…..…..……….… Male / FemaleDate of Birth …………………… Address: ………………………………………….……….………………..……………………………….………………...………..…….. Postcode ………….……Email address (if any) ……….………………………….….………………….….………………….Home or Mobile Telephone number (if any) ……….…………………………….…………….…..Which school / college do you go to (if any) ……………………………………………………….Have you been part of one of our Takeover Day events before? Yes / No  |

**Your interests**

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| We have put together a set of jobs across Norfolk that young people will take on for the day. We want to try and match you to the right job. Which three areas you are most interested in from the list below? Please write a number 1 next to your first choice for the day, a 2 for your second choice and a 3 for your third choice.  |
| Emergency services (e.g. Fire and Rescue Service, Police) |  |
| Health services (e.g. working in a hospital)  |  |
| Government and politics (e.g. MP, councillors, council staff)  |  |
| Photography |  |
| Journalism (e.g. newspapers, local TV and radio) |  |
| Creative industries (e.g. communications, marketing and graphic design) |  |
| Engineering  |  |
| Accountancy and financial services |  |
| Libraries  |  |
| Museums and heritage (e.g. National Trust)  |  |
| Research (e.g. Norwich Research Park, university researcher / lecturer) |  |
| Wildlife and conservation |  |
| Running a large business (e.g. being a managing director / chief executive) |  |
| Running a charity or voluntary group |  |
| Running events and venues (e.g. theatres, the Forum, OPEN) |  |

Describe yourself in 50 words – we’ll use this to help to match you with the right job.

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**The next two pages are for your parent or carer to complete – you must give us a contact number for use in emergencies**

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| Parent or carers full name: ……………………..……………………………………………………..Address: …………………………………………………………………………………………………….…..………………………………………………………………………. Postcode…………………………Home phone number ………………………… Mobile phone number ………….…………………Work phone number ..…………………………  |

**Your child’s medical history and dietary requirements**

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| Please give details of: * any recent illnesses or contact with any infectious disease within the last month
* allergies to be avoided (e.g. medicines, food, drink, bee stings)
* other information which you feel might be useful for the visit leader to be aware of (e.g. phobias, epilepsy, hyperventilation, diabetes)
* any restrictions on diet (e.g. vegetarian, vegan, diabetic)

………………………………………………………………….……………………………………….………………………………………………………………….……………………………………….………………………………………………………….…………………………….…………………Please give names and dosages of any medications being taken (These must be handed to the visit leader):………………………………………………………….…………………………….…………………Has your child received a tetanus injection in the last five years? Yes ⬜ No ⬜Doctor’s name, address and telephone number: ………………………………………………………………………………………………….…….…………………………………………………………………………………………………….…….…Do you agree to the above named young person receiving pain-relieving medication when appropriate (one dosage of paracetamol only)? Yes, I agree ⬜ K No, I do not agree ⬜   |

**Photography**

During the course of the project there may be opportunities to publicise some of the activities that the young people are involved in. This may well involve filming or photographing young people for use in the local media; we welcome these opportunities and hope that you do too. There may also be occasions when we arrange photography for our own purposes, such as displays, our website and publicity brochures.

Photography or filming will only take place with the **permission** of the adult responsible for each young person and under their supervision. Young people will only be named if there is a particular reason to do so (e.g. they have completed a specific activity or achieved an award). Home addresses or contact details will never be given out.

**I understand that images may be taken of the above named young person as follows:**

* By the local media in covering programme activities that show the programme and young people in a positive light (participating in activities, sports, prize-givings, etc).
* By photographers acting on behalf of the programme for use in displays and publicity material. (Images will be used for a maximum of 2 years and will then be destroyed.)

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| Having read the statement above, do you give your consent for photographs or other images to be taken and used? (please **tick** the appropriate box) |  | **YES**, I give my consent for pictures to be taken and used |
|  | **NO,**  I do not give my consent for pictures to be taken and used |

N.B. There may be other circumstances, falling outside the normal day to day activities of Norfolk County Council, in which pictures of young people are requested. We recognise that in such circumstances specific consent from parent or guardian will be required before we can permit photography or filming of young people.

* I confirm that I have parental/carer responsibility for this young person.
* I am willing for my child to take part in the above visit/journey, and having read all the information provided, I agree to his/her taking part in the activities involved.
* I fully understand that, while the supervisory adults in charge of the group will take all reasonable care of the young people, neither they, nor Norfolk County Council, can necessarily be held liable in respect of loss or damage to property or injury suffered by my child arising out of the educational visit/journey, unless such loss, damage or injury results from the negligence of Norfolk County Council, its employees or official volunteers.
* I agree to my child/ward receiving medication as instructed and any emergency dental, medical or surgical treatment, including anaesthetic or blood transfusion, as considered necessary by the medical authorities present.

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| Signed: ……………………………………….. Relationship ………………………………………………Please print name: ………………………….. Date: ………………………………………………………. |

Should there be any amendments to this form after it has been handed in, please contact the visit leader immediately. The above information will be stored on a database and will be used for the administration and delivery of activities being organised by Norfolk County Council to monitor statistical information for the visit and for no other purpose, in accordance with the Data Protection Act (1988). All personal information will be held in the strictest confidence. It will not be made available to any third party other than those involved in the delivery of the visit/activities.

**Please send your completed application form to: Chris Williams, Norfolk County Council, Room 501, County Hall, Martineau Lane, Norwich NR1 2DH.**