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## BIG PICTURE INTERNSHIP - HOST EMPLOYER CONSENT FORM

*Please complete and return this form and the attached acknowledgment.*

***I/We agree to offer the Big Picture program outlined below:***

NAME OF STUDENT: \_\_\_\_\_ Contact No. : \_\_\_\_\_

DATE OF BIG PICTURE PROGRAM: \_\_\_\_\_

NAME OF EMPLOYER: \_\_\_\_\_

POSITION: \_\_\_\_\_

ADDRESS OF EMPLOYER: \_\_\_\_\_

CONTACT PERSON AT EMPLOYER: \_\_\_\_\_

PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

PERSON WHO WILL BE SUPERVISING STUDENT: \_\_\_\_\_

PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

SUMMARY OF TASKS STUDENT IS LIKELY TO PERFORM: \_\_\_\_\_

\_\_\_\_\_

SPECIAL REQUIREMENTS (CLOTHING, FOOTWEAR, CERTIFICATES): \_\_\_\_\_

\_\_\_\_\_

WORKING HOURS: Start: \_\_\_\_\_ Finish: \_\_\_\_\_ Lunch: \_\_\_\_\_

ANY OTHER COMMENTS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature: ..... Date:.....