RUBICON OUTDOOR CENTRE
WORK EXPERIENCE APPLICATION

Name _____ **Preferred dates from:**_____
School :_____ **to**:_____

Experience in Outdoor Activities: _____
_____
_____

Experience working with people: _____
_____
_____

How comfortable will you be in supervising Secondary Students?

Very Fairly A bit nervous Nervous Don't know

How keen are you to undertake a career in Outdoor Education?

Very Fairly Not Sure Maybe Unlikely

Do you believe you have a clear idea of what is expected of an Outdoor Educator?

Yes Fairly good Not sure No

Do you expect to study at Tertiary Level to become an Outdoor Educator? Yes / No

At Rubicon Outdoor Centre, Work Experience students are treated as responsible employees and are expected to act as such. Will this approach suit you? Yes / No

A small fee will be charged to cover Rubicon's out of pocket expenses. Eg. meals

Home address: _____ **School Address:**_____

_____ _____

Phone Number: _____ **Phone number:**_____

Email :_____ **Contact:**_____

Year level : _____ **Age :** _____

Please forward to: Work Experience Co-ordinator
Rubicon Outdoor Centre
264 Rubicon Rd Ph: 5773 2285
Thornton 3712 Fax: 5773 2441