Application Form

The Feed is a social enterprise and charity based in Norwich. We provide great food through our catering business and café, but we also provide supported work experience and coaching to build skills and confidence. We aim to make positive changes by helping people access training and employment.

If you (or your client / service user) are interested in our work experience or coaching, please fill in and return this form.

**Next Steps**

When we receive your form, we’ll invite you to come and meet with us. In that meeting, we’ll discuss where and how you are, and what kinds of work or training you are interested in. If we think we can help, we’ll work with you to come up with a plan to get you there.

**We’ll make a plan**

This might include taking part in our work experience or 1:1 coaching - or a mixture of the two - and support to get the help you need elsewhere. We have strong links with lots of different organisations: they can offer work experience, volunteering opportunities, and jobs, as well as support with housing, money and health.

Please return the completed form to

support@thefeed.org.uk

or

The Feed, 78-80 Prince of Wales Road, Norwich NR1 1NJ

About you

|  |  |
| --- | --- |
| Full name: |  |
| Address (or c/o address): |  |
| Phone: |  |
| Email: |  |
| Date of birth: |  |
| Gender: |  |
| Ethnicity: |  |
| Food allergies/dietary requirements: | Please note that we cannot guarantee an environment free of nuts or other allergens |
| I am interested in- (delete as appropriate) | The Bloom Project (for women only)Supported work experience (for all)The New Leaf project (for people with an offence history and Veterans) |
| What would you like to gain from working with The Feed? |
| What would you say makes it difficult for you to get into work or training?This might include things such as being homeless, drug / alcohol misuse, your mental or physical health, a history of offending, lack of qualifications or anything else that you feel gets in your way |

|  |
| --- |
| Are you working with any other supporting organisations?Please include contact details if so |
| Are you currently unemployed? If so, when was the last time you worked? |

Referrer information (if applicable)

|  |  |
| --- | --- |
| Name:  |  |
| Job Role: |  |
| Organisation and address: |  |
| Phone:  |  |
| Email: |  |
| Date of referral: |  |

|  |
| --- |
| If someone else has completed this form for you, by signing this form, you give consent for the information above to be shared with us: Participant signature |
| Referrer’s signature (if appropriate) |