



STUDENT PROSPECTIVE ESTABLISHMENTS FORM HOSPITALITY PRACTICE II

Student Name:
Student Number:
Student Email:
Student Cell:

To assist the Work-integrated Learning in managing the process of placements for Hospitality Practice II, please indicate your preferences of placement below:

Preferred Areas of Placement

1. _____
2. _____
3. _____

Prospective Placement Establishments

1. _____
2. _____
3. _____

If you were provided the opportunity to specialise in a department, which department would you be interested in?

Additional comments regarding placements.
