**Placement Planning Information**

**PLACEMENT (the one this form is planning for):**

**NAME:**

|  |
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| **Prior experience with these client groups (before joining the Lancaster programme):**  |
| Your status (e.g. assist. psychol. voluntary etc) | *Supervisor(s)*  | *Location*  | *How long?*  | *How often?*  |
| **Previous relevant placement(s) experience:** |
| Supervisor(s)  | Location  | Setting (e.g. hospital, community, etc)  | Theoretical orientation  | Distance from home  |
| Any relevant comments on your **previous placement experience?** Any outstanding **gaps** to be filled?   |
| **Personal circumstances:** 1. Where will you be living during the next placement?

2. Do you have any special personal circumstances you wish to have taken into account when the next placement is allocated?  |
| **Academic work**Please state what you are likely to have completed by the end of your current placement i.e. PALS #1/ 2/ 3 /PASE |
| Any other relevant information |