

[Agency Name]
[Agency Address]
[City, Postcode]
[Phone Number]
[Email Address]

[Date]

[Candidate Name]
[Candidate Address]

Subject: Confirmation of Working Trial Shift

Dear [Candidate Name],

This letter is to confirm the details of your upcoming working trial shift. This trial is an opportunity for you to demonstrate your skills and for us to assess your suitability for future assignments with our clients.

Trial Details:

- **Client Name:** [Client/Company Name]
- **Date:** [Date of Trial]
- **Start Time:** [Time]
- **Estimated End Time:** [Time]
- **Location:** [Full Address of Worksite]
- **Reporting To:** [Supervisor Name/Job Title]

Requirements:

- **Dress Code:** [e.g., Black trousers, white shirt, safety boots, etc.]
- **Equipment:** [List any tools or ID required]
- **Payment:** [Details regarding if/how the trial shift is paid]

Please arrive 15 minutes before your scheduled start time. If you are unable to attend or will be late, you must contact us immediately at [Phone Number].

By attending this trial, you agree to follow the health and safety regulations of the site and maintain professional conduct at all times.

We wish you the best of luck with your trial.

Yours sincerely,

[Consultant Name]
[Agency Name]