## **Newpark Comprehensive School**



## **Transition Year Work Experience**

Dear Sir / Madam,

Thank you very much for facilitating our work experience scheme for the following Transition Year student. We greatly appreciate your help and support.

Student name: Form teacher: Dates of placement:	
In order to comply with the Department of Education and Science regulations we are obliged to ensure that all Work Experience employers have a Safety Statement as required under Section 12 of the <i>Safety, Health and Welfare at Work Act (1989/2005)</i> . Please car you confirm on the enclosed form that your company has a Safety Statement and also that the contact details for your workplace are accurate.	
for students on work experience pla	epartment of Education and Science insurance policy acement. This policy indemnifies the employer in the ent. Should you need more details or a copy of the t Newpark.
On arrival for work experience, each student will bring a progress report form which we ask you to complete and return to the school as soon as possible after the placement either via the student or by post. No payment is expected for work experience as it is considered to be part of the student's education during Transition year.	
Should you experience any difficulty Teacher or myself at Newpark. Thank	, please do not hesitate to contact the student's Form c you again.
Yours faithfully,	
Anna Johnston Work Experience Co-ordinator	Derek Lowry Principal

Email: aj@newparkschool.ie

 $\begin{tabular}{lll} Newpark Comprehensive School, Newtownpark avenue, Blackrock \\ Telephone: & 01-2883724 & Fax: 01-2782478 \end{tabular}$