



Our Lady's School

Founded 1953
Templeogue Road, Terenure, Dublin 6w
Telephone 4903241 Fax 4922511



Email: admin@olschool.ie

March 2018

Dear Sir/Madam

Work Experience Placement for: _____ **Class:** _____

On behalf of Our Lady's School I would like to thank you for accepting the above student on a work experience placement. Work experience is a very valuable part of our Transition Year Programme and its success is in no small part due to the generosity and goodwill of the local business community.

Our work experience programme will take place during one of the following weeks;

15th- 19th October 2018, 11th - 15th February 2019, 25th -29th March 2019 or 1st -5th April 2019

Students will be covered by school insurance for the duration of their placement, (see attached). Please note that they covered for normal working hours but are not permitted to work at night.

While on work experience students are expected to be punctual, courteous and to carry out their assigned tasks in a professional manner. All our students have attended a course reviewing what to expect in the workplace and what is expected of them in return.

As work experience is designed to give students the widest possible insight into the general workplace, I would be most grateful if you could facilitate their exposure to a comprehensive scope of tasks and appropriate responsibilities.

I would be obliged if you could complete the reply slip below and return it to the student as soon as possible. Should you have any queries please do not hesitate to contact me.

Yours faithfully

Caitriona Coyne
Work Experience Co-ordinator (workexperience@olschool.ie)

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Student's Name: _____ Class: _____

Company Name: _____ Dates of work placement: _____

Address _____

Phone _____ Email _____

I confirm that I have accepted this student for a work experience placement, to perform some of the following duties.

Contact Person: _____ Signature: _____