

A.M.D.G.

CRESCENT COLLEGE COMPREHENSIVE S.J.



TRANSITION YEAR
WORK EXPERIENCE PACK
SEPTEMBER 2020-MAY 2020



A.M.D.G.

CRESCENT COLLEGE COMPREHENSIVE S.J.

DOORADOYLE, LIMERICK V94 W6W8

Dear Parent/Guardian,

All students offered a place in Transition Year are required to undertake Work Experience/Work Shadowing in an area of employment that they are interested in for one day per week for half the school year. Work experience will take place on Friday of each week.

Your son/daughter will receive Work Experience Forms which need to be signed by the student, parent/guardian and employer. It is essential for insurance purposes that these forms be properly completed and returned to the Guidance Counsellors as soon as possible before the student goes on Work Experience.

I ask for your cooperation in this matter. If the forms are not returned, the student will not be covered by the school's insurance. The Work Experience forms include:

1. A Work Experience Grid (September 2020-May 2020)
2. The Work Placement Summary Sheet
3. Student Code of Conduct
4. Garda Vetting Invitation Form (NVB1) & Parent Consent Form

Forms 1, 2 and 3 need to be completed and returned to the Guidance Counsellors by Monday, 7th September 2020.

Documentation for the Employer:

1. Letter from School
2. The Work Placement Summary Sheet (same sheet as above)
3. Student Code of Conduct (same sheet as above)
4. Host employers Guidance Leaflet
5. State Indemnity Confirmation Statement
6. Employers Report on Work Experience

The work placement summary sheet needs to be signed by the employer, parent/guardian and student and returned by Monday, 13th January 2020. The student must have one, work placement summary sheet signed for each Work Experience.

All forms can be downloaded from the Crescent website: www.crescentsj.com under Guidance and Transition Year. Please note there is a CV template included on the website.

Yours sincerely,

Peter Moloney
Guidance Counsellor

Ita Danaher
Guidance Counsellor

Caroline Coughlan
Guidance Counsellor

Transition Year Work Experience Grid

September - December

Student Name:	Class:
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Date	Employer	Address	Contact Name	Contact Number
September				

October				

November				

December				

Forms to be returned to Guidance counsellor by September 7th

Parent's signature: _____

Work Placement Summary Sheet

- Sections A, B and C to be completed by the school, in consultation with the student and a signed version forwarded to the host employer.
- Sections D and E are then to be completed by the host employer signed and returned to the school contact person directly or via the student. The host employer should retain a completed version for their records.

A. Student Details	B. Parent/Guardian Details
Student's Name:	Parent/Guardian Name:
Student's Class:	Parent/Guardian Address:
Student Address:	Parent/Guardian mobile number:
Student has personal accident cover: <input type="checkbox"/> Yes <input type="checkbox"/> No	Parent/Guardian work number:
Relevant student medical conditions:	
Start date of placement: _____ End date of placement: _____	

C. School Details	
School Name: Crescent College Comprehensive SJ	School Phone Number: 061 229655
School Address: Dooradoyle Limerick V94 W6W8	School Email: info@crescentsj.com
Contact person name: Ita Danaher, Peter Moloney, Caroline Coughlan	Contact Person Work Email: info@crescentsj.com
School insurance details	Contact person work phone number: 061 229655
	State Indemnified

D. Host Employer Details (to be completed by Host Employer)	
Host employer:	Host employer phone number:
Host employer address:	Contact person name:
	Contact person role:
	Contact person phone number:
	Contact person email:
Host employer insurance details:	The host employer has employers has Employers liability and Public liability cover in place <input type="checkbox"/> Yes <input type="checkbox"/> No The school may request copies of such insurance documentation

E. Placement Details(to be completed by Host Employer)	
Placement Programme:	
Type of work placement:	Hours of work:
Description of tasks to be performed:	

Please confirm that the following documents have been provided to the host employer:

Signed: _____ Date: _____
Student

Signed: _____ Date: _____
Parent/Guardian

Signed: _____ Date: _____
School contact person

Signed: _____ Date: _____
On behalf of the Host Employer



Student Work Experience

Code of Conduct

Student Initials

I agree that:

- I will attend the workplace on the right days and at the times agreed with my employer/ workplace supervisor
- I will perform my placement duties to the best of my ability and comply with all reasonable directions of the employer and its employees.
- If during the placement I have access to information which is private and confidential, I will not convey to any person outside the organisation any knowledge or information which I have gained as a result of the placement.
- I will notify my employer and school of any absences or changes in my placement (eg, sickness, appointments, etc.)
- If I am in contact with any members of the public as part of the placement, I will treat them with the highest respect and politeness as I am aware that I am representing the organisation at all times during the placement.
- I will comply with all Health & Safety regulations.
- I recognise that my involvement in work experience is a privilege and as such I have responsibilities to my employer and my school.

Student's Signature: _____

Supervisor's Signature: _____

Parent/Guardian Signature: _____



Guidelines for completing Electronic Vetting Invitation Form (NVB1)

- Completing this Invitation Form is only the **first stage** of the vetting process
- Type the required information onto the form
- All fields are mandatory except Middle Name and Eircode
- The email address that is inputted will receive a vetting form for completion from **evetting.donotreply@garda.ie** - **You must reply to this email to start the vetting process. If you have gmail – please check your spam folder.**
- Role being vetted for: This must be clearly stated.

It must be obvious that this is a relevant work or activity where a necessary and regular part of that work or activity consists mainly with the applicant having access to, or contact with, children or vulnerable persons. E.g. a Caretaker in a second level school.

If you are involved in assisting the school with coaching, mentoring, counselling, training or teaching children or vulnerable persons. E.g. Volunteer Coach of the football team in the school.

Generic terms such as "Volunteer" will not suffice as it doesn't describe the work being done.

- Current Address means the address you are now living at.
- The address fields should be completed in full. No abbreviations.
- Don't forget to **click on box**
- Print out the form or return the form to the school for printing, whichever has been agreed.
- Sign the form. Applicant's signature should be legible. It should not be an abbreviated signature.
- The Date on the form is the date that the form has been completed and submitted to the School Principal.

ACCS
10H Centrepoint Business Park,
Oak Drive,
Dublin 12



ACCS Ref:

**Invitation Form NVB 1
for students aged between 16 & 18
completing work experience**

Section 1 – Personal Information

Under Sec 26(b) of the National Vetting Bureau (Children and Vulnerable Persons) Acts 2012 to 2016, it is an offence to make a false statement for the purpose of obtaining a vetting disclosure.

Forename(s):											
Middle Name:											
Surname:											
Date Of Birth: DD/MM/YYYY			/			/					
Email Address: of Parent/Guardian											
Confirm Email Address: of Parent/Guardian											
Contact Number:											
Role Being Vetted For: Title of Role must be clearly stated (e.g. teacher assistant, childcare worker)											
Current Address:											
Line 1:											
Line 2:											
Line 3:											
Line 4:											
Line 5:											
Eircode/Postcode:											

Section 2 – Additional Information

Name Of School:

I have provided documentation to validate my identity as required *and*
I consent to the making of this application and to the disclosure of information by the National Vetting Bureau to the Liaison
Person pursuant to Section 13(4)(e) National Vetting Bureau (Children and Vulnerable Persons) Acts 2012 to 2016.

Please click on box

Applicant's
Signature:

Date: / /

Note: Applicant should type the requested information onto the form, print the form, sign the form and present to the School Principal. The school should return the NVB 1 Form, NVB 3 Form and Confirmation Form to the Association of Community and Comprehensive Schools at the above address. **An invitation to the eVetting website will then be sent to the Parent/Guardian's email address provided above.**



PARENT/GUARDIAN CONSENT FORM (NVB 3)

Applicant Details

Forename(s):

Surname:

Date of Birth:
DD/MM/YYYY

	/	
	/	

Parent/Guardian Details

Under Sec 26(b) of the National Vetting Bureau (Children and Vulnerable Persons) Acts 2012 to 2016, it is an offence to make a false statement for the purpose of obtaining a vetting disclosure.

Forename(s):

Surname:

Email Address:

Relationship to applicant:

Father: Mother: Guardian:

Address:

Line 1:

Line 2:

Line 3:

Line 4:

Line 5:

Eircode/Postcode

Parent/Guardian Consent

I, being the Parent/Guardian of the above named applicant, consent for the National Vetting Bureau to conduct vetting in respect of the above named applicant in accordance with the National Vetting Bureau (Children and Vulnerable Persons) Acts 2012 to 2016.

Parent/Guardian
Signature:

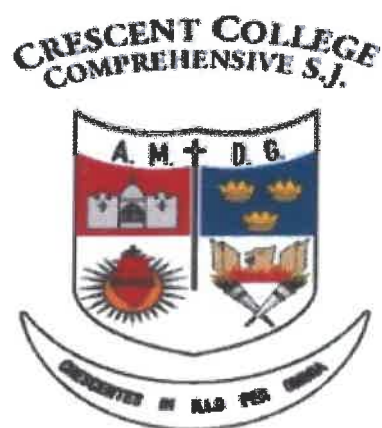
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Date:

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A.M.D.G.

CRESCENT COLLEGE COMPREHENSIVE S.J.



TRANSITION YEAR WORK EXPERIENCE

DOCUMENTATION FOR THE EMPLOYER



A.M.D.G.

CRESCENT COLLEGE COMPREHENSIVE S.J.

DOORADOYLE, LIMERICK V94 W6W8

Dear Work Experience Provider,

Students taking part in Transition Year at Crescent College Comprehensive SJ are required to undertake a work experience placement in an area of interest to themselves. The practical experience gained by the students has been of great benefit in helping them decide on their further education and careers. Work experience gives them the opportunity to gain an insight into the workplace and student regard it as one of the highlights of the year.

This year, starting in September, students will undertake work experience on Friday of each week up to Christmas. This work experience can be with one employer for the full duration or can be broken up into a few work experience days with different employers.

The student should provide you with:

1. Letter from the school
2. The work placement summary sheet (section D needs to be completed and returned to the student)
3. Host Employers Guidance Leaflet
4. State Indemnity Confirmation statement
5. Employers Report on Work Experience (to be returned to the school)
6. Student Code of Conduct

We thank you for your generous co-operation in the past. This Programme could not succeed without your help.

If you have any queries regarding the Transition Year Work Experience Programme you can contact the Guidance Counsellors on 061 229 655.

Yours sincerely,

Peter Moloney
Guidance Counsellor

Ita Danaher
Guidance Counsellor

Caroline Coughlan
Guidance Counsellor



HOST EMPLOYERS GUIDANCE LEAFLET

Dear Host Employer,

Thank you for considering facilitating a work placement for our student which will take place from ____/____/____ to ____/____/____. The work placement will provide the student with valuable experience of the work environment and help him/her gain practical experience, assist their career choices and build their industry skills. The school community is deeply appreciative of the opportunities provided.

Please see a 'Work Placement Summary Sheet' attached which contains key details relating to the placement including:

- A. Student Details;
- B. Parent/Guardian details;
- C. School contact details;

Can you please complete sections 'D. Host Employer Details' and 'E. Placement Details' of the 'Work Placement Summary Sheet' and return a signed copy to the school directly or via the student

Please find some guidance on the work placement programme below. Please do not hesitate to contact the school if you have any queries in relation to the programme.

What is work experience?

Work experience in post-primary schools is a short-term placement of students with local employers during the school year. Placements are organised by the school authorities in association with the student and are an integral part of the **student's education programme**.

What are the benefits to host employers?

Participating in work placement programmes provide host employers with an opportunity to:

- Participate in the education and career development of young people in the community.
- Assist young people in evaluating potential career paths and develop future recruitment channels.
- Strengthen your links with the community and raise your business profile.

What are the benefits to students?

Work experience programmes provide students with an opportunity to:

- Observe a variety of tasks being completed in the workplace;
- Enhance their knowledge and understanding and prepare them for the world of work;

- Undertake supervised work appropriate to their abilities;
- Evaluate industries that are of interest to them and explore potential career paths.

What are my roles and responsibilities as the host employer?

- Provide a safe workplace environment and appropriate supervision for the student;
- Assign tasks and responsibilities to students to match their ability and learning ability
- Ensure that an induction is provided to the student including instruction and details on the appropriate tasks, emergency procedures, special arrangements e.g. uniform, protective clothing etc.
- Try and avoid work placements where the student will be working alone with an adult for a long period of time.

What activities should students not partake in?

Students should not partake in the activities which:

- Are beyond their physical or psychological capacity;
- Involve the use of specialist machinery or equipment;
- Require specialised training

Are students covered by insurance while on work placement?

Community and Comprehensive Schools are State indemnified which extends to cover work placements. This means the school will be indemnified by the State in respect of all claims for personal injury and third party property damage, arising from the negligence of the school. Please see a State indemnity Confirmation Statement attached which operates in lieu of an insurance policy. As State indemnity is enshrined in legislation, the State indemnity Confirmation does not stipulate a period of cover as it is effective from the date issued. Employers who provide placements for students should confirm that it is appropriate with your insurer. Most students have personal accident insurance which provides cover for medical costs in the event of an accidental injury.

Yours sincerely,

School Principal

**State Indemnity
Confirmation Statement
(Work Experience)
Community and Comprehensive Schools**



The State Claims Agency confirms that Community and Comprehensive Schools (indemnified schools noted overleaf) will be indemnified by the State¹ in respect of all claims for personal injury and third party property damage, arising from the negligence of the schools, their servants and/or agents.

This indemnity is in respect of personal/bodily injury and or third party property damage which was as a result of the students and/or schools negligence. This indemnity also extends to school staff (special needs assistants), who may from time to time be required to attend work experience with a student from a Community and Comprehensive school.

The indemnity provided is unlimited in amount. A claim for damages can include all associated costs and expenses for which the indemnified are legally liable or incurred by the indemnified. There is no jurisdiction or territorial limits in respect of students/staff participating in a work placement abroad as part of your schools work experience programme.

There are no exceptions to the above statement. The school and host employer shall determine the appropriate duties for the student while on work experience and shall formally risk assess these activities. High risk activities such as the list below should be avoided or prior approval sought from the State Claims Agency:

1. Work in Atomic or nuclear energy installations or plants
2. Aviation work or airport risks but not in respect of ground operational duties which do not involve work airside
3. Work in mines, collieries or quarries
4. Work in Ship breaking or ship repairing yards
5. Tunneling or work in sewers
6. Stevedoring or dock side risks
7. Any work in connection with explosives
8. Work in Gas works or filling of any gas into cylinder
9. Tree felling or lopping
10. Excavations below 3 metres in depth; Height work in excess of 5 metres
11. Work in reservoirs
12. Work on boats or trawlers
13. Work in equestrian centres and/or participation in show jumping/horse riding activities but not excluding grooming horses under supervision, cleaning out empty stables once horses have been removed, cleaning tack and clerical duties in connection with the stables.

As State indemnity is enshrined in legislation, this document operates in lieu of a certificate of insurance and shall not be subject to change or require renewal unless there is a change in legislation. This State Indemnity Confirmation Statement does not have or require a policy number or stipulate a period of cover. The State Indemnity Confirmation Statement provided is effective from the date indicated and the limit of indemnity is unlimited in amount (in relation to personal injury and third party property damage liabilities, arising from the negligence of the school, its servants and/or agents). Issuance of this State Indemnity Confirmation Statement in circumstances not covered by State indemnity would not act in lieu of insurance cover.

The host employer must have insurance cover in place in respect to their legal liabilities e.g. the condition of the workplace.

Ciarán Breen
Director

¹ Under the National Treasury Management Agency (Amendment) Act, 2000 and subsequent orders the management of personal injury and third party property damage claims was delegated to the State Claims Agency (SCA).

The following are State Indemnified Community and Comprehensive Schools:

An Scoil Chuimsitheach, Cork	Killinarden Community School, Dublin 24	St. Tiernan's Community School, Dublin 16
Ardee Community School, Louth	Kilrush Community School, Clare	St. Brendan's Community School, Offaly
Ashbourne Community School, Meath	Kinsale Community School, Cork	Tallaght Community School, Dublin 24
Ashton Comprehensive School, Cork	Loreto Community School, Donegal	Tarbert Comprehensive School, Kerry
Athboy Community School, Meath	Mayfield Community School, Cork	The Royal and Prior Comprehensive School, Donegal
Bailieborough Community School, Cavan	Millstreet Community School, Cork	Trinity Comprehensive School, Dublin 9
Ballinamore Community School, Leitrim	Moate Community School (Moate Business College), Westmeath	Tullow Community School, Carlow
Ballincollig Community School, Cork	Mount Temple Comprehensive School, Dublin 3	
Ballinrobe Community School, Mayo	Mountmelllick Community School, Laois	
Ballinteer Community School, Dublin 16	Mountrath Community School, Laois	
Ballyhaunis Community School, Mayo	Moyne Community School, Longford	
Ballymakenny College, Drogheda	Newpark Comprehensive School, Dublin	
Beara Community School, Cork	Old Bawn Community School, Dublin 24	
Bishopstown Community School, Cork	Phobailscoil Iosolde, Dublin 20	
Blackwater Community School, Waterford	Pobalscoil Chiarain, Meath	
Blakestown Community School, Dublin 15	Pobalscoil Chloich Cheannfhaola, Donegal	
Boyne Community School, Meath	Pobalscoil Chorca Dhuibhne, Chiarraí	
Cabinteely Community School, Dublin 18	Pobalscoil Ghaoth Dobhair, Donegal	
Carndonagh Community School, Donegal	Pobalscoil Inbhear Sceine, Kerry	
Carrick-on-Shannon Community School, Leitrim	Pobalscoil Iosa, Dublin	
Carrigaline Community School, Cork	Pobalscoil na Rosann, Donegal	
Cashel Community School, Tipperary	Pobalscoil na Tríonóide, Cork	
Castlecomer Community School, Kilkenny	Pobalscoil Neasain, Dublin 13	
Castlerea Community School, Roscommon	Pobalscoil Rosmini, Dublin 9	
Celbridge Community School	Portmarnock Community School, Dublin	
Choláiste Cholmcille, Donegal	Portumna Community School, Galway	
Clifden Community School, Galway	Ramsgrange Community School, Wexford	
Colaiste Chiarain, Kildare	Scoil Chuimsitheach Chiaráin, Galway	
Coolmine Community School, Dublin 15	Scoil Mhuire Community School, Kildare	
Crescent College Comprehensive School, Limerick	Scoil Phobail Mhic Dara, Galway	
Donahies Community School, Dublin 13	Scoil Phobail Sliabh Luachra, Kerry	
Douglas Community School, Cork	St. Aidan's Community School, Dublin 24	
Dunmore Community School, Galway	St. Aidan's Comprehensive School, Cavan	
East Glendalough School, Wicklow	St. Attracta's Community School, Sligo	
Gallen Community School, Offaly	St. Caimin's Community School, Clare	
Glenamaddy Community School, Galway	St. Columba's Comprehensive School, Donegal	
Gorey Community School, Wexford	St. Louis Community School, Mayo	
Gort Community School, Galway	St. Mark's Community School, Dublin 24	
Hartstown Community School, Dublin 15	St. Patrick's Comprehensive School, Clare	
Heywood Community School, Laois	St. Peter's Community School, Passage West	
Holy Child Community School, Sallynoggin, Dublin	St. Wolstan's Community School, Kildare	
Holy Family Community School, Rathcoole, Dublin	St. Clare's Comprehensive, Leitrim	
John The Baptist Community School, Limerick	St. Colmcille's Community School, Dublin 16	
Kildare Town Community School	St. Kilian's Community School, Wicklow	



Employers Report on Work Experience

Student Name: _____

Work Experience Dates: _____

Supervisor's Name: _____

Employer Address: _____

Employer Phone No: _____

At the end of the placement please rate the student by placing a tick in the appropriate boxes. Many thanks for taking the time to fill out this evaluation. We would be grateful if you could return it to the Guidance Counsellor, Crescent College Comprehensive SJ, Dooradoyle, Limerick by post or **email: info@crecentsj.com**.

Rating	Excellent	Good	Acceptable	Needs Improvement	Not Assessed
1. Personal appearance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Attitude towards job	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Ability to follow Instructions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Ability to complete jobs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Practical skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Social Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Ability to handle technology	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Relationship with staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Attendance & Punctuality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please add any additional comments you would like to make about this participant.

Signature of Supervisor: _____

Date: _____