



St. Oliver Post Primary School, Oldcastle, Co. Meath

Telephone: 049 8541180
Fax: 049 8542201
Email: stoliverpostprimary@lmetb.ie

22nd May 2017



Principal: Mr. Brendan Corcoran Deputy Principal: Mr. Micheal McCafferty

Dear Parent/Guardian,

Next year is a new and exciting year for your son/daughter, who has been offered a place on the Transition Year Programme 2017/2018. Students will begin TY on Monday 28th August from 9.00am – 12.30pm.

REQUIREMENTS FOR TRANSITION YEAR

Uniform

Full school uniform is required for regular school days but we also request that each TY student wear a plain coat/jacket. Hoodies/Regular Sweatshirts/Team Jackets are not allowed.

PE Uniform

As TY involves students being involved in a number of trips away, courses such as First Aid/Self Defence etc. we request that each student have their full PE uniform which includes
1. **Compulsory** Navy or White Polo Shirt & Navy Sweatshirt with school logo and student initials.
2. Navy or Black Tracksuit Bottoms (predominantly plain – small logos & white stripes only).

Subject Requirements

In order to ensure that your son/daughter is fully organised for all their new classes they **must** have the following items with them on their first day in August:

(Please note that your son/daughter should have many of these items from Junior Cert.)

- A4 Folder and A4 Refill pad
- 100 pack of Plastic Pockets
- 5 A4 Hardback Copybooks and 5 Soft Copybooks
- Art equipment: 2 x 3B pencils, A3 Sketchbook, A2 folder
- Pencil Case – pens, pencils, eraser, sharpener, ruler, calculator, etc.
- Large Pritt Stick, colouring pencils and markers.

INFORMATION EVENING FOR TY PARENTS AND STUDENTS

We will meet you and your son/daughter on Thursday 7th September at 5pm to outline all of the TY programme as well as the subjects/modules that we hope to offer. **An essential element of the evening is the signing of the Student Contract of Learning by parents/guardians and students.**

WORK EXPERIENCE

We request that each student attends three **different** placements. Please find the dates for these placements on the back of this letter. **It is so important that you look for all three work experience placements as soon as possible and that you get a placement that is as close as possible to the career area that your son/daughter would like to investigate as part of TY.** In this pack are three copies of a letter for each employer which includes the school's insurance details for host employers. We recommend that you put **your contact details on the employer letter** so that you can be contacted in the event of an emergency. Also included are three copies of an employer information form for each employer to fill out and sign. **In order for work experience to start on time all employer information forms must be returned to the school office in an envelope with your name on it by Wednesday 18th August.** Each year a small number students find a placement they want but the dates we provide don't suit that particular employer. In these cases we recommend that you contact the school and we will do our best to accommodate this. We keep a supply of employer letters and employer information forms in the Secretary's office should you need a fourth copy of

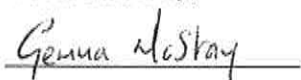
them in these particular cases. An online version of this pack will also be on the school website under the TY tab in the Parent's Section.

PLACEMENT DATES TERM 1	PLACEMENT DATES TERM 2	PLACEMENT DATES TERM 3*
Friday 8 th September	Friday 12 th January	Friday 23 rd February
Friday 15 th September	Friday 19 th January	Friday 2 nd March
Friday 22 nd September	Friday 26 th January	Friday 9 th March
Friday 6 th October	Monday 29 th January	Friday 16 th March
Friday 13 th October	Tuesday 30 th January	Friday 23 rd March
Friday 20 th October	Wednesday 31 st January	Friday 13 th April
Friday 27 th October	Thursday 1 st February	Friday 7 th April
Friday 10 th November	Friday 2 nd February	Friday 20 th April
Friday 17 th November	Friday 9 th February	Friday 27 th April
Monday 20 th November		Friday 4 th May
Tuesday 21 st November		Friday 11 th May

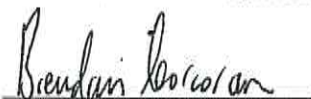
*Belfast Trip will be in March – date to be confirmed.

We wish your son/daughter the best of luck in their Junior Certificate exams and we look forward to working with our new TY group in August.

Yours sincerely,



Gemma McStay
Transition Year Programme Co-ordinator and Year Head



Brendan Corcoran
Principal



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22nd May 2017

A Chara,

I would like to take this opportunity to thank you for taking our Transition Year student for work experience. These days are for the purpose of gaining experience and insight into the world of work as well as forming a basis for personal development and maturity.

Our students are afforded the opportunity to attend three different placements over the course of the year as outlined below:

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Friday 15 th September	Friday 19 th January	Friday 2 nd March
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Tuesday 21 st November		Friday 11 th May

*Belfast Trip will be in March – date to be confirmed.

The contact details of our student’s parent/guardian **should have been outlined below** should you need them in the event of an emergency:

A copy of our insurance document is on the back of this letter. Please note that this document expires on 31st December 2017 however we will forward you an up to date document, upon request, as soon as we have it ourselves. You will be requested to fill out an Employer Report to assess his/her progress before they finish up and return it to our student.

Yours sincerely,

Gemma McStay - Transition Year Work Experience Co-ordinator

Employers Liability & Public / Products Liability - Indemnity Letter to Host Employers

Insured:	Louth and Meath Education and Training Board
Policy Number:	CCP0002171
Period of Insurance:	01 January 2017 to 31 December 2017
Policy Type:	Employers Liability & Public / Products Liability
Limit of Indemnity: Employers Liability	Not less than €13,000,000 any one Occurrence
Limit of Indemnity: Public Liability	Not less than €6,500,000 any one Occurrence
Limit of Indemnity: Products Liability	Not less than €6,500,000 any one Occurrence and in any one Period of Insurance

Dear Sir/Madam,

This is to confirm that the above Sections of the Policy are extended to indemnify a Host Employer in respect of legal liability arising out of or in connection with Student / Trainee placements for which the Insured would have been entitled to indemnity under such Sections had the Claim(s) been made against the Insured provided always that:

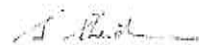
- such party is not entitled to indemnity under any other policy
- such party shall, as though they were the Insured, observe fulfil and be subject to the Terms, Definitions, Conditions, Exclusions, Endorsements and Limits of the Policy insofar as they can apply
- the Insurer shall have the full conduct and control of all Claim(s) in respect of which indemnity is provided by this Extension
- nothing in this Extension will serve to increase the liability of the Insurer to pay any amount in excess of the Limit of Indemnity and indemnity will apply in priority to the Insured.

The indemnity provided by this cover is not intended to apply in respect work placements relating to the following activities:

- atomic energy risks
- aviation work or airport risks (but this does not apply to ground operations, catering, hangar observation or offices/reception areas of airports)
- demolition work of any kind
- work in mines, collieries or quarries
- ship breaking or ship repairing
- tunnelling or work in sewers
- stevedoring or dockside risks
- any work in connection with explosives
- gas works or filling of any gas into cylinder
- tree felling or lopping
- any work carried out at a height in excess of 5 metres (but this height limit is not necessarily from ground level. It may be from a first floor or some secure level)
- excavations below 3 metres in depth
- work in reservoirs
- driving a mechanically propelled vehicle
- work on a boat or trawler
- use of any oxyacetylene or electric welding or cutting plant or any blow lamp or blow torch unless the student is wearing personal protective equipment and is directly supervised by the Host Employer.

If you have any queries, please do not hesitate to contact me using the details below.

Yours faithfully,



John Sheridan
Underwriter IPB Insurance
Direct: +353 1 6395549 Email: John.Sheridan@ipb.ie



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EMPLOYER INFORMATION FORM



Student Name: _____

EMPLOYER CONTACT DETAILS

Name of Company: _____

Name of Contact Person: _____

Tel Number: _____

*Email Address: _____

*(Email address must be included)

Placement Address: _____

I confirm that the above named student will be carrying out his/her work experience with us during the placement dates listed for **Term 1 2 3** Please circle preference.
If any of the dates given here do not suit you to have our student please indicate below

Signed: _____ Date: _____

Employer/Supervisor

PARENTAL CONSENT

I give my son/daughter permission to carry out his/her work experience placement with this employer on the dates listed above. I will give the school and the employer advance notice, if my son/daughter cannot attend work on any of these dates.

Signed: _____ Date: _____

(Parent / Guardian)



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Student Name: _____

EMPLOYER CONTACT DETAILS

Name of Company: _____

Name of Contact Person: _____

Tel Number: _____

*Email Address: _____

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(Parent / Guardian)