



Skerries Community College

Coláiste Phobal na Scéirí

Dublin Dun Laoghaire Education & Training Board

Principal: Mr Kevin McLoughlin

**Transition Year
Extra Work Experience Form**

Dates:

Student Name:

Class:

Official Name of Company / Employer:

Address of Company:

Eircode of Employer:

Phone Number:

Email Address:

What is the purpose of the company / organisation:

Name the Person whom you know in the Company / your contact person:

Name of Manager (if different):

What type of work will you be doing:

What are your start and finish TIMES in the day:

Monday:

Thursday:

Tuesday:

Friday:

Wednesday:

Parent / Guardian Signature:

Compulsory

Company Stamp: