



RESTRICTED

Notes:

1. There is a high interest level in this programme, please be advised that completion of this application form does NOT guarantee a position on the Work Placement.
2. Each and every applicant should submit a one page composition highlighting why they want to take part in the programme, what their interests, hobbies and career prospects are and if they desire to join the Defence Forces.
3. In the unlikely event that a student sustains an injury, however so caused, while undertaking the programme The Minister for Defence is indemnified through the schools insurance policy.
4. The programme includes Front Line Services demonstrations.
5. In the event that you are offered a place on the work experience programme, please be advised, it is a day to day programme. There will NOT be accommodation available. Students will be required to have a packed lunch as the defence Forces will NOT be providing meals.
6. There are limited places available on this programme. We will endeavour to accommodate as many students as possible, but please be aware there will be students who unfortunately may not receive an offer.
7. Data Protection: Information collected on this application form is used solely for the 2 Brigade Transition Year programme and no other purpose. An example would be if we required to contact a student in relation to the submitted application, we may contact by phone or email a person listed on the form.
8. We will only hold the information for as long as is necessary and in line with current legislation.
9. The information will not be shared with a third party unless you consent or unless the processing is necessary for compliance with a legal obligation to which the Defence Forces Data Controller is subject.



2 BRIGADE TY WORK EXPERIENCE APPLICATION FORM

Please read the notes on the reverse of this document prior to filling in the application. You are requested to fill in all parts of the application form.

1. Name and Address of School:

2. School Telephone Number: _____

3. Email Address of TY Co-Ordinator: _____

4. Name of Student: _____

5. Address of Student: _____

6. Date of Birth: _____

7. Contact email address(Parent/Guardian): _____

8. Person(s) to be contacted in the event of a difficulty or emergency involving the student during work placement:

a. School – Name: _____ Phone: _____

b. Home/Family – Name: _____ Phone: _____

9. Illness, Allergies etc. which may affect student's well-being during work placement:

(This information will be kept strictly confidential).

Signed: _____ (Student) Date: _____

Signed: _____ (Parent/Guardian) Date: _____

Signed: _____ (Teacher/TY Coordinator) Date: _____

APPENDIX (5)
PARENTAL CONSENT FORM

Anything written on this form will be held in confidence. The Defence Forces need to know these details in order to meet the specific needs of your child. I give permission for my child as named below to attend Defence Forces activity.

Child's Name _____ DoB _____ Age _____

Address _____

Parent/Guardian Name _____ Tel No. _____

If unavailable contact _____ Tel No. _____

Prescribed medications _____

Are there any particular concerns, information or events that the Defence Forces should know about in respect of the child's protection and welfare? (Please detail here)

I will inform the Defence Forces of any important changes to my child's health, medication or needs and also of any changes to our address or phone numbers given.

I give consent to my child engaging in Defence Forces activities Yes/No

I give consent to my child being photographed engaging in Defence Forces activities. Yes/No

*Photos will only be used to promote a positive image of Defence Forces personnel engaging with children during the conduct of Defence Forces activities

I will ensure that my child travels to and from Defence Forces activities safely Yes/No

I confirm that all details are correct to the best of my knowledge Yes/No

The Defence Forces is committed to ensuring that your child's safety and welfare is paramount. The Defence Forces are committed to meeting their responsibilities in relation to the safety of children engaged in any Defence Forces activity

Parent/Guardian Signature _____ Print Name _____

Date _____

ANNEX 'C'

INSURANCE GUIDELINES FOR WORK EXPERIENCE

The Minister for Defence, Department of Defence or the Defence Forces do not have employer Insurance which could be extended to cover students on work experience programmes.

In order that an offer of Work Experience with the Defence Forces can be made it will be necessary for you to have adequate Insurance Protection against injury / risks etc. that could arise during the work experience period. A formal statement from an insurance company must be submitted which expressly confirms that the Minister for Defence is indemnified against all liabilities as an employer in connection with providing a work experience arrangement with the Defence Forces for you.

Please note that the level of Insurance Cover which is normally available is an extension of a school's standard cover may not be adequate, as it may only cover the schools liabilities on work experience programmes.

Please liaise with your school and forward to this office a copy of the Insurance Cover to indemnify the Minister for Defence, Dept of Defence and the Defence Forces.

Defence Forces 2025/2026 TY Programme

Location Preference

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Cathal Brugha Barracks, Rathmines, Dublin 6 - 20-24 October 2025

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Finner Camp ,Ballyshannon, Donegal - 16-20th March 2026

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Aikens Barracks, Marshes lower, Dundalk, co.Louth 2-6th March 2026

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Custume Barracks, Grace Rd, Athlone, Co. Westmeath – 2-6th March 2026

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Cathal Brugha Barracks, Rathmines, Dublin 6- 20-24th April 2026

- Please note preference will be given on a first come first serve basis
- Places are limited to 28 individuals per location
- Individuals must be able to be dropped (0900) and collected (1630) from these locations