



Primary Teachers Appointment and Re-Appointment Form 2021/2022

Incomplete forms will be returned to the School.

Teacher Details

PPS Number

Payroll No.

First Name

Surname

Gender

Correspondence Address

All correspondence to personnel paid on the Department's payroll must issue to this address (not school address)

Date of birth

Civil Status (see appendix A)

Phone No.

e-mail

☐ Tick if you would like to receive your correspondence through Irish

School Details

Roll Number

School Name

e-mail

Phone No.

Employment Details

Contract Type

Hours

Type of Post

(e.g. Principal, Mainstream, SET, Specialist Subject)

Date of Appointment:

End Date of Fixed Term Appointment*:

(*in case of Fixed Term appointment – please complete end-date if known)

Origin of the Post:

Name of Teacher(s) being replaced:

Bank Details (not to be completed unless the account details have changed). NB: Please ensure your Bank Account is within the Republic of Ireland and is SEPA compliant.

Bank Name

Bank Address

Name on Account

IBAN

BIC

Once fully completed, this document should be returned to the following address with the school roll number indicated on the outside of the envelope.

Primary Teachers Payroll Section,
Department of Education,
Cornamaddy,
Athlone,
Co. Westmeath, N37 X659

Alternatively please email completed form to
primtch_payroll@education.gov.ie
clearly indicating school roll no in subject line.

Payment on the first issue of the 2021/22 school year can only be guaranteed if this form is received by Primary Payroll Division by Friday 9th of July 2021

Details of Teaching Council Registration

2

Tick to certify that you are currently registered with the Teaching Council for the purpose of Primary teaching, in accordance with circulars 31/2011, 25/2013 & 52/2013.

Teaching Council Registration No.:

If you are not registered you cannot be appointed and should not complete this Form

Note: It is the teacher's responsibility to ensure Teaching Council registration is in order, renewed in time and kept up-to date. A teacher **cannot** be paid for any period where they are not registered for Primary teaching, or where they have allowed their registration to lapse. It is the school's responsibility to verify that the proposed appointee is currently registered with the Teaching Council.

Previous Employment Details

Keeping your tax information up to date with Revenue is your responsibility. If you need to make contact with them regarding this employment they may ask for our Employer Reg. No., which is **4000099H**.

Previous Teaching Service

If you have previous teaching service, please detail it using the below table. Previous service may entitle you to incremental credit – see 'Information Note for Primary Teachers', which you should receive from your principal with this form.

| Date From | Date to | Contract Type /Status | School Name & Address |
|-----------|---------|-----------------------|-----------------------|
|-----------|---------|-----------------------|-----------------------|

Garda Vetting

Statutory vetting obligations under the National Vetting Bureau (Children and Vulnerable Persons) Acts 2012 to 2016 and Circular 31/2016 effective from 29 April 2016.

This section must be completed.

*Note: Teachers being redeployed are subject to the requirements of both the National Vetting Bureau (Children and Vulnerable Persons) Act 2012 to 2016 **and** circular 31/2016*

Tick to indicate that the school authority has complied with its statutory vetting obligations under the National Vetting Bureau (Children and Vulnerable Persons) Acts 2012 to 2016 **and** with the requirements of Circular 0031/2016 in respect of this proposed appointment.

If this requirement has not been met the proposed appointee is not eligible to be appointed. The appointment form should **not** be submitted. The school authority should also be aware that it is a criminal offence not to comply with a vetting obligation under the National Vetting Bureau (Children and Vulnerable Persons) Acts 2012 to 2016.

Medical Fitness to Teach

Tick to indicate that you have received the 'Medical Fitness for Employment Assessment Report' from the proposed appointee confirming medical fitness to teach, in accordance with the Occupational Health Service Employers Procedures Manual.

Form of Authorisation – Illness Benefit Payments

(NOT to be completed if being reappointed in a Permanent/CID/Temporary capacity the same school as last year)

The mandate below should be completed by teachers who are liable for PRSI Class A.

Payment of salary during periods of absence is dependent on compliance with PRSI regulations.

I have read and understand the conditions and procedures involved in the operation of illness benefit pay schemes applicable to Primary teachers. I am aware that depending on my PRSI contribution record I may be entitled to payment from the Department of Social Protection in respect of absences under these schemes. I acknowledge that payment from the Department of Education during absence on illness leave will be subject to the following conditions:

- (a)** that I make the necessary claims for social insurance benefit to the Department of Social Protection within the required time limits and will, to the best of my ability, comply with whatever requirements are laid down by that Department of Social Protection as a condition of claiming benefit.
- (b)** that I agree to any amendments to the payment of the Illness Benefit scheme that may be introduced by the Department of Education in the future.

I also acknowledge that any payments due to me from the Department of Social Protection in respect of such absences under the current arrangements for payment may be recovered by deduction from my salary in the event that I fail to comply with the foregoing conditions.

Accordingly, I accept that in order to ensure compliance with the above undertaking and the illness leave regulations, the Department of Education may be required to make direct contact with the Department of Social Protection to establish what payments were made to me, when they were made and the amount and duration of such payments. I hereby authorise the Department of Education to make such enquiries. I understand that any information obtained from the Department of Social Protection will be used only for the foregoing purposes and will not be disclosed to any unauthorised person.

Signed (Teacher)

PPS No.

Date

Declaration under the Single Scheme Act

(Must be completed by persons taking up an appointment in the public service)

Please use attached Guidance Note to assist in the completion of this Declaration

Any queries regarding this Declaration should be directed to Pension Unit at pensions@education.gov.ie

Warning: *If we do not receive this form completed in full & accurately there will be a delay commencing you into a pension scheme and therefore you may have to pay pension deduction arrears*

Section 51 (*Duty to make declarations, etc.*) of the *Public Service Pensions (Single Scheme and Other Provisions) Act 2012* requires that: Any person who

(a) takes up employment in a public service body, and

(b) either—

(i) has an entitlement to any preserved pension or any preserved lump sum or any other retirement benefit, or

(ii) has received or is in receipt of retirement benefits,

under a pre-existing public service pension scheme of which he or she was or is a member, shall provide a declaration to that effect to the relevant authority.

1. CAREER HISTORY (Required **ONLY** for Public Sector employments in **Ireland** which may include employment outside of the teaching/education sector E.g. HSE, ETB, Civil Service etc. (Your Primary Teaching Service is not required))

You must include a verified copy of the service history for any service outlined in the table below

Employer

Dates of Employment

Pensionable

2. I hereby declare that I am **I am not** **(tick as appropriate) currently in receipt of any remuneration (pay) from any other public service body.**

REMUNERATION/PAY (Please complete if ticked “I am” above)

Description

Annual gross pay

Paying authority

% of Full time position

3. I hereby declare that:

a) I have received I have not received or I am in receipt of retirement benefits (tick as appropriate) OR

b) I have I do not have (tick as appropriate) an entitlement to any of the pension benefits specified above.

PENSION BENEFIT CURRENTLY IN PAYMENT (Please complete if ticked “I have/I am” above)

Description (Retirement, Ill Health,
Early Retirement,)

Paying authority

(a) PENSION BENEFIT FUTURE ENTITLEMENTS (Please complete if ticked “I have” above)

Description

Paying authority

Signed:

Name (Block Capitals):

Date of Birth

PPS Number:

Payroll Number:

Date:

For Office Use only:

Single Scheme Member Y/N:

Sent to Pension Unit:

Recorded by:

Guidance Note for completing the Declaration under the Single Scheme Act

If you are a teacher taking up a post in the Public Sector (*E.g. HSE, Civil Service, ETB etc*) **for the FIRST time**, you will not already have an entitlement to a pension therefore you should complete this declaration as follows:

- | | |
|---------------------|--|
| 1. Career History | Not Applicable |
| 2. Remuneration/Pay | This should be ticked as “I am not” employed in any other Public Sector Post and not in receipt of salary prior to this appointment. |
| 3. Pension Benefit | You should tick “I have not received” at (a) and “I do not have” at (b) No other information is required in the boxes below. |

The form should be signed, dated and PPSN included

If you are a teacher taking up a post in the Public Sector having worked in a teaching post previously and/or in the wider Public Sector, you may have an entitlement to a pension as a result of that employment therefore you should complete this declaration as follows:

- | | |
|---------------------|--|
| 1. Career History | You should include service completed in Ireland either/both in teaching posts and the wider Public Sector. |
| 2. Remuneration/Pay | This should only be ticked as “I am” if you are currently employed in another Public Sector Post otherwise tick “I am not” |
| 3. Pension Benefit | <p>You should tick “I received” at (a) if you have previously paid a pension contribution in any teaching post/Public Sector Body and claimed a pension benefit on foot of these contributions.</p> <p>You should tick “I have not received” at (a) if you have previously paid a pension contribution in any teaching post/Public Sector Body to the current date and may be due a pension at a date in the future on foot of these contributions.</p> <p>You should tick “I am in receipt” at (a) if you are currently receiving a pension benefit having paid a pension contribution from any teaching post/Public Sector Body.</p> <p>You should tick “I have” at (b) if you have ever paid a pension pension contribution in any teaching post/Public Sector Body and have an entitlement to claim a benefit in the future.</p> <p>You should tick “I do not have” at (b) if you have ever paid a pension contribution in any teaching post/Public Sector Body but do not have an entitlement to claim a benefit in the future (e.g. obtained a refund of contributions).</p> |

The form should be signed, dated and PPSN included

Teacher's Checklist and Declaration

In the case of each of the following I certify that:

1. I the undersigned declare that the information recorded in this document is true, accurate and complete. I understand that I am responsible for the accuracy of the information and that if I wilfully suppress any information I risk the loss of appointment.
2. I am currently registered with the Teaching Council and I will continue to renew my registration with the Teaching Council for the duration of my appointment. I have agreed to have my qualification details made available to the Dept.
3. I understand that Section 30 of the Teaching Council Act 2001 makes it a requirement for me to maintain my registration with the Teaching Council in order to be paid a salary by the Dept. Education in accordance with Circular 0052/2013.
4. I have read, signed and received my contract of employment and agree to abide by the terms of said contract.
5. I have completed the self-declaration where appropriate in accordance with paragraph 4 of circular 07/2013 titled The Single Public Service Pension Scheme for Teachers and Special Needs Assistants employed in Primary and Secondary, Community/Comprehensive Schools.
6. I confirm that, in accordance with the requirements of Garda Vetting Circular 0031/2016, I have provided the school authority with a child protection related statutory declaration which was made in the current or the previous calendar year.
7. I confirm to the school authority that since the date on which I signed that statutory declaration, to the best of my knowledge and belief there is nothing, from a child protection perspective, in relation to my conduct, character or personal background of any nature that would adversely affect the position of trust in relation to children or vulnerable persons in which I would be placed by virtue of my appointment to a teaching post in this school.
8. I acknowledge and understand that any false or misleading confirmation as to my conduct, character or personal background or any failure of mine to inform the school authority of relevant changes that may affect my suitability, from a child protection perspective, will constitute a breach of my contract of employment and may be grounds for summary dismissal by the school authority.
9. I am aware that I am not now, or in the future, required to disclose to a school authority details of any convictions regarded as spent under the Criminal Justice (Spent Convictions and Certain Disclosures) Act 2016 but that, in accordance with Section 10 of that Act, this does not however apply in the case of any conviction in respect of offences specified in Part 1 or 2 of Schedule 1 of that Act or those specified in Schedule 3 of the National Vetting Bureau (Children and Vulnerable Persons) Acts 2012 to 2016.
10. I also undertake to inform the above school authority of any changes to the above stated position that may affect my suitability, from a child protection perspective, for continued employment with the school authority or for any subsequent employment with the school authority.
11. I will refund to the Minister for Education any monies to me which are not properly payable. I agree to comply with the Department's Overpayment Policy as outlined in Circular 84/2015 in this regard.
12. I understand the conditions and procedures involved in the operation of maternity/adoptive pay schemes. Please see Terms & Conditions Web Book.
13. I have read the Information Note for Primary Teachers.
14. I have signed the mandate form, Form of Authorisation (illness benefit payments)
15. I understand that upon receipt of all relevant documentation in the Department it may take 8 weeks before payment is made to me. This is due to completion of the payroll process and if this document is returned incomplete that I will not be paid salary until after a fully completed form is received and processed by the Department.
16. I declare that I will seek approval from my employer before engaging in any external work and that any external work engaged in by me must not be such as to interfere with the fulfilling of my duties and responsibilities to the school.

Teacher

Date

Principal/Chairperson's Checklist and Declaration.

In the case of each of the following I certify that:

1. All relevant sections of this document have been completed and the details therein are true and accurate.
2. A written contract of employment has been signed by both parties, this contract is held in this school and a copy has been given to the teacher.
3. I accept that it is the responsibility of the school authority to ensure that this form is correctly completed in order for salary and allowances, where applicable, to be paid to the appointee.
4. I have verified that the appointee is currently registered with the Teaching Council.
5. In respect of new one year fixed-term contracts being offered for the 2021/22 school year, or a new CID contract, I certify that the terms of Circular 0023/2015 have been complied with.
6. I have checked employment references with at least 2 of the most recent employers and also verified with them the most recent employment history.
7. I have received confirmation of fitness to teach in respect of the proposed appointee from the Occupational Health Service.
8. I verify that the proposed appointee has qualifications suited to the purpose of the post and meets the criteria for which s/he is proposed (Refer to Circular 31/2011, 25/2013 & 52/2013)
9. I verify that the requirements of the National Vetting Bureau (Children and Vulnerable Persons) Acts 2012 to 2016 and Garda Vetting Circular 0031/2016 have been met in respect of this proposed appointee.
10. I confirm that this appointment is in accordance with the terms of Circular 0019/2021 Staffing Arrangements in Primary schools for the 2021/2022 school year.
11. The teaching vacancy became known to me on:
12. Is this Teacher taken from a Redeployment Panel: Yes? No
13. If yes, please state Redeployment Panel
14. This vacancy was notified to the relevant redeployment panel operator (e.g. Diocesan Secretary) or the Department where no panel applies on:
15. If the vacancy was not filled by a permanent or CID holding teacher from a redeployment panel, please state the reason why.

Principal /School Manager / Chairperson

Date

In the Case of the appointment of a Principal Teacher please ensure that the form is signed by the teacher and countersigned by the Chairperson of the Board of Management.

Data Protection Privacy Statement

The **main purpose** for which the Department requires the personal data provided by you is the payment of wages. It is also necessary for the payment of pension at retirement. The personal data provided may be exchanged with your school in respect of your appointment as required by your contract; the Teaching Council, where appropriate, in respect of the status of your registration, the Revenue Commissioners, the Department of Social Protection., the Department of Public Expenditure and Reform as required by law; and any other bodies whom you have instructed to arrange for voluntary deductions to be made from your wages. The privacy notice outlining further information in relation to this form can be found at www.education.ie

Full details of the Department's data protection policy setting out how we will use your personal data or that of your child's data as well as information regarding your rights as a data subject are available at <https://www.education.ie/en/The-Department/Data-Protection/>. Details of this policy and privacy notice are also available in hard copy from the address below upon request.

Once fully completed, this document should be returned to the following address including the Roll No. on the outside of the envelope

Primary Teachers Payroll Section,
Department of Education,
Cornamaddy,
Athlone,
Co. Westmeath, N37 X659

Completed forms can also be emailed to primtch_payroll@education.gov.ie including the school roll number in the subject line of the email.

Contact details: primtch_payroll@education.gov.ie

11 options that describe a person's relationship in law with another:

1. Single
2. Married
3. Civil Partner
4. Divorced
5. Co-habitant
6. Judicially Separated
7. Separated
8. Former Civil Partner
9. Widowed
10. Surviving Civil Partner
11. Unknown

If Civil Status is not known "Unknown" is selected until status is determined.

Definition of Civil Status (As recognised under Irish national law):

| Option | Definition |
|-------------------------|--|
| Single | An individual who has never been married or in a civil partnership. |
| Married | An individual or two persons of any gender who have registered a marriage with the State. |
| Civil Partner | An individual who is either of two persons of the same gender who are parties to a civil partnership registration recognised by the State that has not been dissolved or the subject of a decree of nullity. |
| Divorced | An individual who was previously married and a decree of divorce has been granted by the relevant court under Family Law (Divorce) Act 1996 or is so recognised under Irish law. |
| Co-habitant | A cohabitant is one of 2 adults (whether of the same or the opposite gender) who live together as a couple in an intimate and committed relationship and who are not related to each other within the prohibited degrees of relationship or married to each other or civil partners of each other. |
| Judicially Separated | An individual who has been granted a decree of judicial separation under the Family Law Act 1995 or is so recognised under Irish Law. |
| Separated | An individual who has separated by agreement without having obtained a decree of judicial separation under the Family Law Act 1995. |
| Former Civil Partner | An individual that was in a registered civil partnership that has been dissolved (other than through the registration of the marriage of a couple previously in a registered civil partnership). |
| Widowed | An individual that was married and has been predeceased by their spouse and who has not subsequently remarried. |
| Surviving Civil Partner | An individual that was civil partnered and has been predeceased by their spouse and who has not subsequently entered another civil partnership or married. |
| Unknown | This field is used when the current civil status of a member is not known and cannot be readily established. This field is only used until the civil status is determined. |