

**Appendix G - Declaration by a school for the 2018/19 school year where a teacher has acquired a CID under Part A1 or A2 of Circular 0023/2015**

(CID Declaration Form must be completed for each **existing** CID holding teacher in the school)

**Section 1 - School details**

School Name and Address	Roll No
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**Section 2 - Please complete in relation to any of the scenarios set out below that apply to your school**

(i)	Teacher Name/PPSN
<p><b>Teacher awarded a full-time CID in or before the 2017/18 school year under the terms of Part A1 or A2 of Circular 0023/2015 who will be remaining in the school as a consequence of a vacancy (permanent or fixed term) arising from the commencement of the 2018/19 school year</b>  <i>Please indicate reason vacancy has arisen and whether it is permanent/fixed term :</i></p> <p>_____</p>	

(ii)	Teacher Name/PPSN
<p><b>Teacher awarded a full-time CID in or before the 2017/18 school year under the terms of Part A1 (reduced qualification period) of Circular 0023/2015 and who will be surplus in the school from the commencement of the 2018/19 school year as the school does not have a vacancy, either permanent or temporary, available for the teacher.</b>  <i>Please indicate reason teacher is surplus in the school for 2018/19:</i></p> <p>_____</p>	

**Section 3 - Please complete in relation to any of the scenarios set out below that apply to your school**

	<b>Tick as appropriate</b>
I certify that the school <u>has provision</u> within its approved staffing allocation for the 2018/19 school year to retain the teacher named at Section 2(i).	
I certify that there is <u>no provision</u> within the staffing allocation of the school for the 2018/19 school year for the teacher named at 2(ii) to be retained in the school and a completed Main Panel application form is attached to this form.	

I am satisfied that the above information is correct.

Signature: \_\_\_\_\_ Date \_\_\_\_\_  
 Chairperson Board of Management

Email address: \_\_\_\_\_