Appendix D

Shared GAM/EAL Post for school year 2014/15

This form should only be completed if re-clustering applies to your school

<table>
<thead>
<tr>
<th>School Name of the Base School for this post</th>
<th>Roll Number</th>
<th>Email Address</th>
<th>Phone No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>School Address</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

1 post = 25 hours
0.8 = 20 hours
0.6 = 15 hours
0.4 = 10 hours
0.2 = 5 hours

Return this form by 14 February 2014 to:
Primary Teacher Allocations Section, Department of Education & Skills, Cornamaddy, Athlone, Co. Westmeath

Notification of a new post created by clustering GAM/EAL hours

Note: To be completed only if your school is a Base School for the Clustered post.
Please ensure that you check the GAM/EAL approved hours in Circular 0007/2014 before completing this form.
If your school is the base school for more than one clustered post, a separate form must be submitted for each post.

<table>
<thead>
<tr>
<th>School Name</th>
<th>Roll Number</th>
<th>GAM/EAL hours in this clustered post</th>
</tr>
</thead>
<tbody>
<tr>
<td>Base School</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2nd school</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3rd school</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4th school</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5th school</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Any change to this cluster arrangement can only be made if:
- there is a change in the GAM/EAL hours for any one of the schools in the cluster in a subsequent school year;
  
or
- all schools in the cluster agree to end the cluster arrangement.

Declaration
I declare that the above information is correct and that I am in agreement with the proposed cluster arrangements for this post as outlined above.

______________________________
Roll no.__________ Date __________
Principal / Chairperson B.O.M. of the base school for the cluster

______________________________
Roll no.__________ Date __________
Principal / Chairperson B.O.M. of the second school in the cluster

______________________________
Roll no.__________ Date __________
Principal / Chairperson B.O.M. of the third school in the cluster

______________________________
Roll no.__________ Date __________
Principal / Chairperson B.O.M. of the fourth school in the cluster

______________________________
Roll no.__________ Date __________
Principal / Chairperson B.O.M. of the fifth school in the cluster