



**6. Details of RETIREMENTS/RESIGNATIONS from Post of Responsibility in the current school year**

Name of Teacher	PPS Number	Post Held	Date Left Post

**7. Declaration**

I certify that:

the teacher(s) listed in part 5 above have been engaged on a fixed purpose contract by the Board of Management to perform the roles and \* responsibilities on an acting basis. This contract is in respect of cover for the same absence and has been performed continuously by the same acting post holder.

all teachers listed above are undertaking the roles and responsibilities assigned to them in accordance with Circular 0003/2018 and have signed \* the Statement of Roles and Responsibilities assigned to them.

\* I authorise the Department of Education & Skills to pay the appropriate allowance for the level of post (API)/APII).

Signed: \_\_\_\_\_  
Principal / Chairperson B.O.M.

Date: \_\_\_\_\_

Return Form to: **Department of Education and Skills, Post Primary Payroll Division, Cornamaddy, Athlone, Co. Westmeath. N37 X659.**

**Data Protection**

The Department of Education and Skills will treat all personal data you provide on this form as confidential and will use it solely for the purpose intended. The information will only be disclosed as permitted by law or for the purposes listed in the Departments registration with the Data Protection Commissioner - REF 10764/A If the information you have provided is to be used for purposes other than outlined in the Departments registration with the DPC your permission will be sought here.