



NOTIFICATION OF SPECIAL NEEDS ASSISTANT LEAVING

Please ensure that this form is completed in respect of a Special Needs Assistant that is leaving your employment. This form should be completed and returned to the address above **at least 14 days in advance of the leaving date**. Completion of this form on time will reduce the possibility of overpayments to Special Needs Assistants.

Name: _____

PPS No.: _____

School Name: _____

Roll No.: _____

School Phone No: _____

Leaving Date: _____
(Last day employed in the school)

Reason for leaving: _____

Please Note: If a post has been made redundant, an SNA may be entitled to a redundancy payment if he/she fulfils the conditions set out in Department of Education and Skills Circular 58/2006.

Please also note the arrangements outlined in Circular 0030/2019 in relation to Supplementary Assignment Arrangements for the 2019/2020 school year. It is the responsibility of the SNA and the School Authorities to submit an application within the time limits set out in both circulars. Late applications cannot be processed.

Signed: _____
Chairperson/Principal

Signed: _____
Special Needs Assistant

Date: _____

Upon completion, this document should be forwarded to:

Non-Teaching Staff (NTS) Payroll,
Department of Education and Skills,
Cornamaddy,
Athlone,
Co. Westmeath
N37 X659

Telephone 090 64 84136

Email: Ntspayroll@education.gov.ie