

**Rannóg na nÍocaíochtaí Teagasc Baile
Rannán na Scoileanna- Airgeadas,
An Roinn Oideachais agus Scileanna
Cor na Madadh
Baile Átha Luain
Co. na hIarmhí
N37 X 659**



**Home Tuition Payment Section,
Schools Division – Financial,
Department of Education and Skills
Cornamaddy
Athlone
Co. Westmeath
N 37 X 659**

HOME TUTOR'S BANK DETAILS

Important: This Department will only operate one (1) bank account for each individual.

Name: _____ PPSN: _____

Payroll No (if applicable) _____ School Roll No: (if applicable) _____

Select from one of the two options below by ticking the relevant box.

1. I have never been paid on any of the payrolls operated by Department of Education and Skill's and I am now providing my bank details :

2. I am currently in receipt of a salary or pension through a payroll operated by the Department of Education & Skills,

Please state the payroll area from which your current or previous salary or pension issued.

Primary Teachers Payroll Section

Post Primary Teachers Payroll Section

Non- Teaching Staff Payroll Section

Retired Staff Payroll Section

Notes:

- Only original forms completed in full by the tutor will be accepted by the Department.
- This form should be submitted as soon as possible.
- This form should only be submitted if the tutor wishes to change the bank details currently held by the Department of Education & Skills.

MY BANK DETAILS ARE AS FOLLOWS:

Please ensure that this is printed clearly as errors will cause delays in any payment due to you.

Declaration :

I declare that the bank details furnished in this form are true and correct and that I have full withdrawal access to this bank account. I undertake to immediately inform the Department of any change to this bank account. I am aware that by changing/ updating or advising this Department of this bank account that all payments from all sources due to me from this Department will be issued into this account.

I hereby authorise the sharing of this information with the relevant Department's payroll areas.

Tutors Name : _____ (PRINT ONLY)

Tutor's PPSN : _____

Tutor's Signature : _____ Date : _____

Bank Details

Name of the bank Account : _____

Name and address of Bank : _____

Bank Account Number : _____

IBAN _____

BIC Number _____

**PLEASE RETURN COMPLETED FORMS TO:
The Department of Education & Skills
Home Tuition Payments Section,
Schools' Division Financial
Cornamaddy , Athlone
Co. Westmeath N37X 659**