





## SECTION 2 (A)

**Students enrolled in schools with a significant medical condition which has caused, and is likely to continue to cause, major disruption to their attendance at school.**

### **MEDICAL DETAILS - To be completed by the student's Doctor**

Name of student: \_\_\_\_\_

Student's Medical Condition: \_\_\_\_\_

In your opinion, will this condition continue to result in disruptions for long periods to the student's school attendance? Yes  No

Please give an estimate of the length of absence: \_\_\_\_\_

Name of Doctor: \_\_\_\_\_

Address: \_\_\_\_\_

Phone No: \_\_\_\_\_

Doctor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **SCHOOL DETAILS - To be completed by the School Principal**

Name of student: \_\_\_\_\_

Is the student currently enrolled in the school for 2021/22 school year? Yes  No

If yes, state class level / year: \_\_\_\_\_

Is the student currently in receipt of resources? Yes  No

Please give details \_\_\_\_\_

Please confirm that all of the absences listed below were as a result of the medical condition stated on the application for Home Tuition. Yes  No

Has the Educational Welfare Services been notified of absences? Yes  No

Name of School: \_\_\_\_\_ School Roll No: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

**Only Attendance Details for the previous school year, i.e. 2020/2021 should be entered below**

*If the student attended a different school for 2020/21, attendance details should be sought from that school by the parent/legal guardian.*

Number of Days on which:	2020/2021
(a) the school was open:	
(b) the student attended:	

Signature of School Principal: \_\_\_\_\_ Date: \_\_\_\_\_

School Stamp:

## SECTION 2 (B)

**Applications on the basis of school phobia and/or associated depression/anxiety which has caused, and is likely to cause, major disruption to their attendance in school.**

### To be completed by School Principal

Name of student: \_\_\_\_\_

Is the student currently enrolled in the school for 2021/22 school year? Yes  No

If yes, state class level / year: \_\_\_\_\_

Is the student currently in receipt of resources: Yes  No

Please give details \_\_\_\_\_

Please confirm that the absences listed below were on the basis of school phobia and/or associated depression/anxiety. Yes  No

Has the Educational Welfare Services been notified of absences? Yes  No

If yes, please state when \_\_\_\_\_

Name of School: \_\_\_\_\_ School Roll No: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

**Only Attendance Details for the previous school year, i.e. 2020/2021 should be entered below**

*If the student attended a different school for 2020/21, attendance details should be sought from that school by the parent/legal guardian.*

Number of days on which:	2020/2021
(a) the school was open:	
(b) the student attended:	

**Please outline details of any collaboration between the school, parents and relevant health professionals in relation to ongoing efforts to reintegrate the student into the school setting:**

**Please give details of engagement with the relevant support agencies (e.g. NEPS, EWO, Child and Adolescent Mental Health Services (CAMHS), TUSLA (Child and Family Agency), HSE, NCSE)**

Signature of School Principal: \_\_\_\_\_ Date: \_\_\_\_\_

School Stamp: \_\_\_\_\_

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## **SECTION 2 (B)**

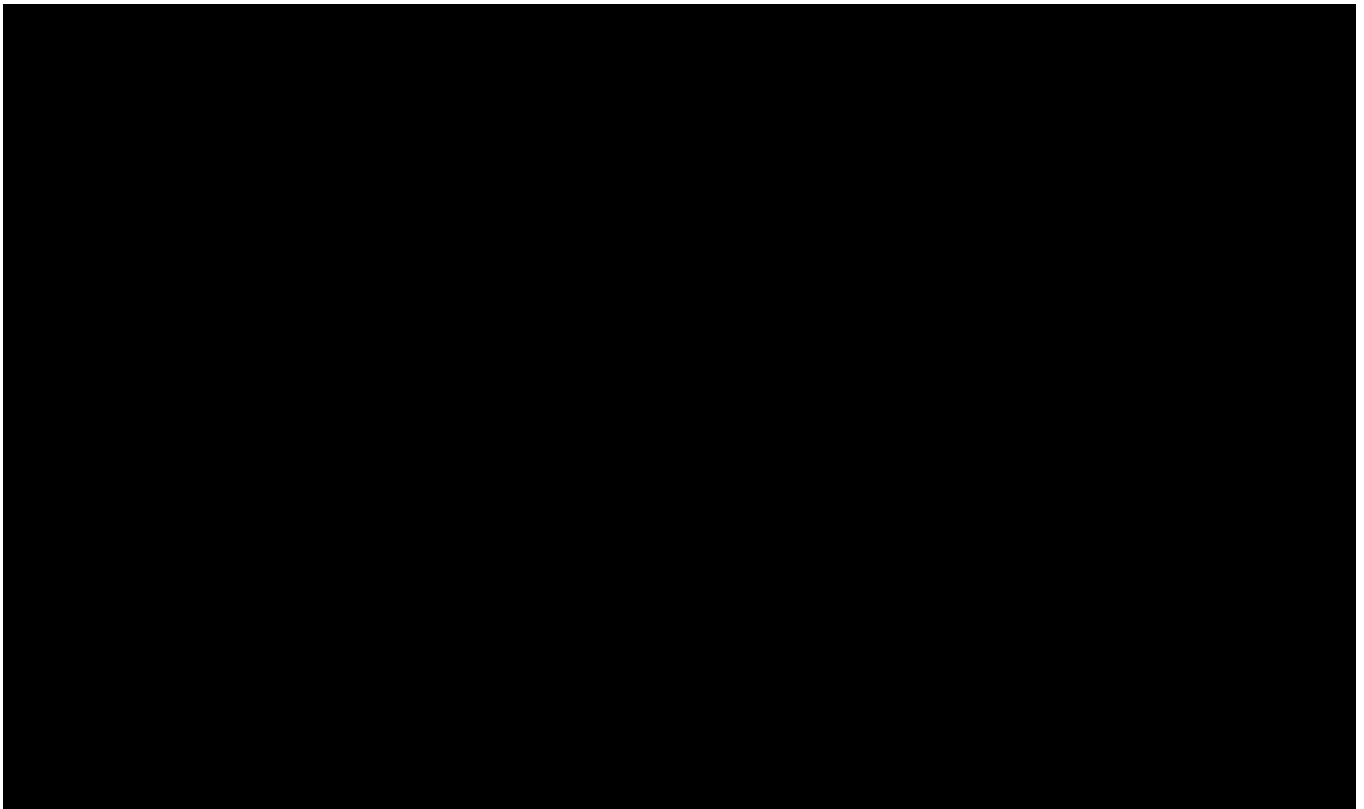
**Applications on the basis of school phobia and/or associated depression/anxiety which has caused, and is likely to cause, major disruption to their attendance in school.**

**Please refer to Section 3 Category (c) of Circular 0038/2021**

**A separate report from a psychologist/ psychiatrist must be attached to this application form which should clearly:**

- Confirm the diagnosis of school phobia and/or associated depression/anxiety
- Provide details of medical or therapeutic intervention plans in place with a view to reintegrate the student back into their school including a recommencement date
- Plan for re-integration of student back into school
- Indicate that absence from school was/is required to facilitate appropriate medical or therapeutic intervention
- Detail engagement with the relevant support agencies (e.g. School, Child and Adolescent Mental Health Services (CAMHS), TUSLA (Child and Family Agency), HSE)

**It is not the role of diagnosing professionals to recommend Home Tuition as an alternative to school. Such recommendations will not be taken into consideration when determining an application.**



## Section 3 Declaration

### Important Notices

1. **Please** note that Sections 1 and (2A or 2B) and Section 3 of the Application Form may be sent to this Department, prior to sourcing a tutor, in order to establish if the child is, in the first instance, eligible for home tuition.
2. **Tuition cannot commence** until tutor details, i.e. Section 4, Appendix 1 and Appendix 2, are received, approved by this Department and a full sanction letter has issued to the parent/legal guardian setting out dates, tutor details and terms & conditions of the tuition.
3. **If you intend to engage more than one tutor** you must notify this Department in advance for approval, stating the number of hour's tuition to be provided per week by each tutor.
4. Post-primary students who are undertaking study of subjects for Junior and Leaving Certificate Examinations need to read carefully the requirements of the State Examinations Commission for practical coursework. The subjects with practical coursework are listed at [www.examinations.ie](http://www.examinations.ie). If the State Examinations Commission requirements are not met, this may result in a student not being able to achieve all of the marks available for the subject.

1. I declare that the information contained in this form is accurate to the best of my knowledge.
2. **I have carefully read and understand the Home Tuition Circular 0038/2021**
3. I confirm that it is in order to have this application form and any associated documents processed by the Department of Education or any nominee of the Department of Education, if this is considered appropriate by the Department.

Applications for home tuition are accepted in the knowledge that personal information supplied, including PPSN, will be used in determining eligibility for home tuition, in processing payments and for statistical purposes. Personal information may be shared between the HSE, TUSLA (Child and Family Agency), National Council for Special Education (NCSE), Dep Department of Children, Equality, Disability, Integration and Youth (DCDIY), The Revenue Commissioners and the Department of Education, including NEPS, for the reasons stated and to ensure that duplicate funding does not occur.

**Signature of Parent/Legal Guardian:** \_\_\_\_\_  
(Same as person named on Page 2 of Application Form)

**Relationship to Child:** \_\_\_\_\_

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

Forms should be returned to the following address:

**Home Tuition Unit  
Special Education Section  
Department of Education  
Cornamaddy  
Athlone  
Co. Westmeath  
N37 X659**

## SECTION 4

### For completion by proposed Tutor

The Statutory Declaration Form and the Form of Undertaking must be completed by the Tutor (Appendices 1 & 2 respectively of the Application Form)

\* All Fields must be completed

**Tutor PPSN:** Your Personal Public Service Number (PPSN) is a unique reference number that is to be used in all dealings with Public Service Agencies, including Revenue. If you need details of your PPSN please contact the Department of Employment & Social Protection (DEASP) - Public Service Identity.

**\*Tutor PPSN:**

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**\*Tutor Forename:**

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**\*Tutor Surname:**

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**\*Tutor Date of Birth:**

D	D	M	M	Y	Y	Y	Y
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**\* Address:**


**\*Email address:** Your e-mail address.

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**\*Contact Telephone No:** Your contact number.

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**\*I am currently registered with the Teaching Council**    Yes     No

(Please note that it is a requirement of the scheme that all tutors are registered with the Teaching Council of Ireland)

**\*Teaching Council No:**

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**\*Are you currently in receipt of payment of a Public Service Pension** e.g. former teacher, civil servant, HSE employee, semi-state employee, etc.?    Yes     No

**If Yes, you must state the type of pension** \_\_\_\_\_

**\*If you have applied to deliver tuition under this Scheme to other children please indicate no. of children:**  (Where you intend to tutor 2 or more children, further details will be required before approval is given for the tuition to commence.)

**Note:** A teacher who is availing of approved paid or unpaid leave from his/her employment is not eligible to deliver tuition. However, a teacher who is on Career Break or who is Job Sharing may be employed as a tutor for the Home tuition Scheme.

**Appendix 1**  
**To be completed by all tutors providing Home Tuition**

In order to comply with child protection guidelines the following child protection related Statutory Declaration must be provided by all persons being appointed as home tutors. A Statutory Declaration is regarded as valid if made in the same or previous calendar year. This form must be witnessed by a Practising Solicitor/Commissioners for Oaths/Notary Public/Peace Commissioner.

**Statutory Declaration**

This statutory declaration must be completed prior to a person being appointed to deliver home tuition.

“I \_\_\_\_\_ of, \_\_\_\_\_

\_\_\_\_\_

in the county of \_\_\_\_\_ aged eighteen years and upwards do SOLEMNLY AND SINCERELY DECLARE as follows:-

that to the best of my knowledge and belief there is nothing, from a child protection perspective, in relation to my conduct, character or personal background of any nature that would adversely affect the position of trust in which I would be placed in relation to children or vulnerable persons by virtue of my appointment to deliver home tuition.

I am aware that I am not now, or in the future, required to disclose to the parents/legal guardians of the child by whom I have been nominated to deliver home tuition, details of any conviction regarded as spent under the Criminal Justice (Spent Convictions and Certain Disclosures) Act 2016, but that, in accordance with section 10 of that Act, this does not however apply in the case of any conviction in respect of offences specified in Part 1 or 2 of Schedule 1 of that Act or those specified in Schedule 3 of the National Vetting Bureau (Children and Vulnerable Persons) Acts 2012 and 2016.

Within a child protection context:

- I hereby confirm my irrevocable consent to the parents/legal guardians of the child by whom I have been nominated to deliver home tuition to the making of such enquiries as they deem necessary in respect of my suitability to deliver home tuition.
- I hereby accept and confirm the entitlement of the parents/legal guardians of the child I am delivering tuition to reject my application or terminate my delivery of the tuition if I have omitted to furnish the parent/legal guardian of the child to whom I am delivering home tuition with any information relevant to my application for the position as a home tuition provider.
- I understand that any false or misleading information submitted by me in relation to my application to deliver home tuition for the child in question will render me liable to automatic disqualification or render me liable to automatic termination of my role as a home tutor.

And I make this solemn declaration conscientiously believing the same to be true and by virtue of the Statutory Declarations Act 1938.”

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
Home Tutor

Print Name: \_\_\_\_\_



Declared before me \_\_\_\_\_ [name in capitals] a [notary public][commissioner for oaths][peace commissioner] [practising solicitor]by\_\_\_\_\_

\*who is personally known to me,

or

\*who is identified to me by \_\_\_\_\_ who is personally known to me,

Or

\*whose identity has been established to me before the taking of this Declaration by the production to me of passport no. [passport number] issued on [date of issue] by the authorities of [issuing state], which is an authority recognised by the Irish Government]

Or

National identity card no. [identity card number] issued on [date of issue] by the authorities of [issuing state] [which is an EU Member State, the Swiss Confederation or a Contracting Party to the EEA Agreement]

Or

[Aliens Passport no. (document equivalent to a passport)][passport number] issued on [date of issue] by the authorities of [issuing state] which is an authority recognised by the Irish Government]

Or

Refugee travel document no. [document number] issued on [date of issue] by the Minister for Justice, Equality and Law Reform]

Or

Travel document (other than refugee travel document) [document no.] issued on [date of issue] by the Minister for Justice, Equality and Law Reform

at

in the City/ County of

on the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_

**Signed:** \_\_\_\_\_

\*Practising Solicitor / Commissioner for Oaths / Notary Public / Peace Commissioner

\* Delete as appropriate

Note: Further information in relation to Commissioners for Oaths and Peace Commissioners is available on [www.citizensinformation.ie](http://www.citizensinformation.ie)

**(Please note signatures from members of An Garda Síochána are not accepted)**

## Appendix 2 Form of Undertaking

I can confirm that since the date on which I signed the attached statutory declaration, to the best of my knowledge and belief there is nothing, from a child protection perspective, in relation to my conduct, character or personal background of any nature that would adversely affect the position of trust in relation to children or vulnerable adults in which I would be placed by virtue of my position as a tuition provider to \_\_\_\_\_ (name of student).

I also undertake to inform the parents/legal guardians of the student to whom I am delivering Home Tuition of any changes to the above stated position that may affect my suitability, from a child protection perspective, for continuing in the role as a tutor for the Home Tuition Programme.

I am aware that I am not now, or in the future, required to disclose to the parents of the child to whom I am delivering Home Tuition details of any conviction regarded as spent under the Criminal Justice (Spent Convictions and Certain Disclosures) Act 2016, but that, in accordance with section 10 of that Act, this does not however apply in the case of any conviction in respect of offences specified in Part 1 or 2 of Schedule 1 of that Act or those specified in Schedule 3 of the National Vetting Bureau (Children and Vulnerable Persons) Acts 2012 to 2016.

I acknowledge and understand that any false or misleading information as to my conduct, character or personal background or any failure of mine to inform the parent of the student to whom I am delivering the Home Tuition Programme may affect my suitability, from a child protection perspective, will constitute a breach of my role as a tutor for the Home Tuition Programme and may be grounds for summary dismissal by the parent/legal guardian.

**I have carefully read and understand the Home Tuition Grant Scheme Circular 0038/2021.**

I confirm that I am fully registered with the Teaching Council.

I confirm that I am currently vetted by the National Vetting Bureau and I shared the result of my vetting search, known as a vetting disclosure, with this parent/legal guardian through the Teaching Council's secure online IT solution, called Digitary.

<b>Tutor Name: Block Capitals</b>	<b>Tutor: Signature</b>
<b>Date:</b>	

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**I understand that I must request a newly issued vetting disclosure in circumstances where I am engaging the tutor for the first time or if I have previously engaged the tutor, I may consider whether a newly issued vetting disclosure is necessary. (see Section 5 of Circular 0038/2021)**

**I can confirm that the tutor I have nominated is currently vetted by the Teaching Council and I have viewed the result of the tutors vetting search through the Teaching Council's secure online IT solution, called Digitary.**

I understand Garda vetting does not provide clearance for persons to work with children. It simply provides particulars of any criminal record and/or specified information in respect of the person concerned or where there is no criminal record or specified information states this fact. The decision on the suitability of a person to work with the child is ultimately a matter for the parent/legal guardian.

<b>Parent/Legal Guardian Name in Block Capitals</b> (same as person named on Page 2 of Application Form)	<b>Parent/Legal Guardian Signature</b>
<b>Date:</b>	

## Before posting to the Department please check the following

### Section 1: Personal Details

I have completed all child and parent/legal guardian details as requested including PPSN and contact details.

### Section 2(A): Medical Condition

The student's Doctor has completed all details on page 3 as requested, including confirmation of medical condition and expected length of absence from school, where applicable.

The student's school Principal has completed all details on page 3 as requested, including school roll number, school stamp and 2020/2021 attendance details.

### Section 2 (B): School Phobia/Anxiety

The student's school Principal has completed all details on page 4 as requested including school roll number, school stamp and 2020/2021 attendance details.

A separate report from the student's Psychologist/Psychiatrist is included with the application.

### Section 3: Declaration

I have read the Important Notices on Page 6.

I have read carefully, and signed, the Declaration on page 6.

### Section 4: Tutor Details

I can confirm all tutor details as requested, including PPSN, Teaching Council Number, and contact details have been completed.

**APPENDIX 1** –Statutory Declaration has been completed in full, signed and **stamped**.

**APPENDIX 2** –Form of Undertaking has been completed and signed by tutor and

**Witnessed** by the parent/legal guardian.

I have provided a breakdown of hours for additional tutors, where relevant.

### Important Notice

❖ No tuition should take place until written confirmation of tutor/s sanction has been issued to you by the Department and payment will not be made in respect of any tuition delivered prior to the approved dates.

It should be noted that the following periods **will not** be covered for payment for any student availing of the Home Tuition Scheme:

**October 2021 mid-term break:** 25<sup>th</sup> October 2021 to Friday 29<sup>th</sup> October 2021 inclusive.

**Christmas 2021:** 20<sup>th</sup> December 2021 to Friday 31<sup>st</sup> December 2021 inclusive.

**February 2022 mid-term break:** 21<sup>st</sup> February 2022 to Friday 25<sup>th</sup> February 2022 inclusive.

**Easter 2022:** 11<sup>th</sup> April 2022 to 22<sup>nd</sup> April 2022 inclusive.

**Bank Holidays:** All bank holidays which fall within the school year

It should also be noted that Home Tuition should reflect the school day and be provided between (9am – 6 pm). Home Tuition should not take place during school holidays, bank holidays and weekends.