

City of Dublin Education and Training Board

CDETb Part-Time Teacher/Industry Sectoral Expert/Tutor Posts

Commencement Form **2017-2018**

(all sections must be completed as indicated)

Centre: _____ Centre No: _____

Are you currently employed as a Teacher/Industry Sectoral Expert/Tutor in another CDETb School/Centre: Yes No

If so please indicate School/Centre : _____

Were you previously employed as a Teacher/Industry Sectoral Expert/Tutor in another CDETb School/Centre: Yes No

If so please indicate School/Centre : _____

1. Personal Details (to be completed by teacher/industry sectoral expert/tutor)

Surname: _____ Staff No: (if employed by CDETb) _____

First Name/s: _____ Telephone No: _____

Address: _____ Mobile No. _____

_____ Email: _____

Are you permitted to live and work in Ireland: Yes No

2. Teaching Council (to be completed by teacher/tutor)

Are you registered with the teaching council? Yes No

Teaching Council Registration Number: _____

Subjects you are registered to teach:
(as stated on Registration Certificate)

To be completed by Principal/Head of Centre / AEO

3. Category (Ensure that all appropriate sections are completed)

(a) H. Dip Student	<ul style="list-style-type: none"> • Timetable showing H. Dip hours must be attached. • You must also identify the teacher who's classes the H. Dip student is taking). • H. Dip hours are not paid 	<input type="checkbox"/>
(b) Mainstream/PLC: Non-Casual	• More than 150 hours and less than full academic year	<input type="checkbox"/>
(c) Mainstream/PLC: Casual	• Less than 150 hours and less than full academic year	<input type="checkbox"/>
(d) Industry/Sectoral Expert		<input type="checkbox"/>
(e) Evening School	• After 6p.m.	<input type="checkbox"/>
(f) Adult Education Service	• Part-time tutor positions	<input type="checkbox"/>
(g) Other	• Please specify:	

Post Title (specific i.e. Art, English) _____ Duration of Post _____

Date of Commencement ____/____/20____ Date of Cessation ____/____/20____

Reason for Post _____ Replacing _____

Number of Hours _____ Funding Program and Code: _____

4. Timetabled Weekly Class Contact Hours for the 2017/2018 session
(to be completed by Principal/Head of Centre/AEO)

• **Attach Teacher Timetable**
Application/Commencement will not be processed without timetable

GARDA VETTING: All staff must have current Garda Vetting prior to taking up duty

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Is appointment within teaching allocation for academic year: Yes No (please tick)

Signed: _____

Date: _____

Principal/Head of Centre / AEO)

5. Pay Related Social Insurance (PRSI) (to be completed by teacher/industry sectoral expert/tutor)

(a) PPS No: _____

(b) If your main employer is elsewhere please tick

(c) Date of Birth (persons over 66 years of age pay a lower rate of PRSI) _____

(d) If you are employed other than by CDETБ please give details of PRSI category (e.g. A1, D1 etc). _____

(e) Please tick as appropriate if you are in receipt of any of the following Social Welfare benefits: (Evidence required)

Medical Card

Widower Pension Other EU

Widow Pension Irish

One Parent Family

Widower Pension Irish

Deserted Wife

Widow Pension Other EU

6. Income Tax (to be completed by teacher/industry sectoral expert/tutor)

Please attach P45 (Cessation Certificate) for the Current Tax Year. If P45 is not submitted Emergency Tax Procedures will be applied.

7. Pension Related Deduction (PRD) (to be completed by teacher/industry sectoral expert/tutor)

Please ensure a completed Declaration is returned with the Commencement form. This form is available in the School and also on the Staff Intranet. PRD will be deducted from employee salaries and will continue to be deducted until a Declaration is received and Pensions Section has determined if the employee is liable.

8. Bank Details (to be completed by teacher/industry sectoral expert/tutor)

BANK STAMP

Bank Account Name: _____

Bank Account Number: _____

Bank Sort Code: _____

Signed: _____

Date: _____

Teacher/Industry Sectoral Expert/Tutor

9. For HR use only:

Please set up on part time teacher payroll. Pay unqualified rate until further notice.

Signed: _____

Date: _____

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