**NOTIFICATION TO THE PATRON OF**

**THE APPOINTMENT OF ASSISTANT TEACHER BY CID**

**School Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Roll No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**School Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**School Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**E-Mail Address : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**NATURE OF VACANCY : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***Date of BoM meeting to ratify appointment* : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name of Teacher receiving CID:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**College of Graduation:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date of Registration with Irish Teaching Council: \_\_\_\_\_\_\_\_\_\_\_ Registration No.: \_\_\_\_\_\_\_\_\_\_\_\_**

**Details of Qualifications to teach Catholic Religious Education: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Has the successful candidate been informed of the Statutory Requirements for Garda Vetting (31/2016)?**

**As Chairperson of the Board of Management of the above school, I herby certify that the rules and regulations laid down by the Department of Education & Science and requirements of the Patron have been complied with in regard to this appointment.**

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