Circular 0001/2014

To: The Managerial Authorities of Recognised Primary, Secondary, Community and Comprehensive Schools and The Chief Executives of Education and Training Boards

Combined Post-Graduate Diploma Programme of Continuing Professional Development for Teachers involved in Learning Support and Special Education – 2014/2015

1. Programmes 2014/2015

In order to assist all schools and educational services in meeting the needs of students requiring learning support and the teaching of students with special educational needs, a combined post-graduate diploma programme of continuing professional development will be offered to teachers in September 2014.

In the school year 2014/2015, this combined post-graduate diploma programme of continuing professional development will be offered in the following centres:

- Church of Ireland College of Education, Rathmines, Dublin 6 (60 places available)
- Mary Immaculate College, South Circular Road, Limerick (50 places available)
- School of Education, National University of Ireland, Galway (30 places available)
- St. Angela’s College, Lough Gill, Sligo (50 places available)
- St. Patrick’s College, Drumcondra, Dublin 9 (55 places available)
- University College Cork, Cork (25 places available)
- School of Education, University College Dublin, Belfield, Dublin 4 (25 places available)

2. Funding

Funding for the programmes in the above Colleges/Universities is provided to each centre by the Teacher Education Section of the Department of Education and Skills.
3. **Aim and Content**

The aim of the programme is to provide substantial theoretical and practical continuing professional development for teachers working with students with special educational needs and for teachers working in recognised mainstream and other educational settings with those students requiring learning support teaching and, thereby, to contribute to the school’s overall capacity in this area. Qualifications will be awarded, by the Colleges/Universities involved, to participants who successfully complete the programme. **Participants will be assessed on the basis of full attendance at the programme venue, successful completion of selected tasks and written assignments (and examinations where relevant), supervision of their work in schools/centres and final evaluation.** Further details will be made available to applicants by the individual College/University.

4. **Duration and Organisation**

The programmes are of **one academic year’s duration.** Applicants should note that there will be a total of **eight weeks’ release** from schools/centres for attendance at the relevant programme venue and the remainder of the year will involve teaching in participants’ own educational settings. There will be some variations between the participating Colleges/Universities in terms of organisation, assessment and title of awards. All of the programmes listed below provide qualifications recognised by the Department of Education and Skills in the area of special education and learning support for teachers in the following roles: Learning Support Teacher and/or Resource Teacher, Teacher in a Special School and Teacher in a Special Class.

5. **Colleges/Universities**

- **Church of Ireland College of Education, Rathmines, Dublin 6 ([www.cice.ie](http://www.cice.ie))**
  
  This programme leads to the award of a Postgraduate Diploma in Learning Support and Special Educational Needs from the University of Dublin, Trinity College. It runs from September 2014 to June 2015 and involves block release from school/centre for a total of eight weeks, along with supervised work in the participants’ own schools/centres and on-going study throughout the year. Participants will also attend the college on four Saturdays during the academic year. Further details are available on the College website. Contact details are available at Appendix 2 of this circular.

- **Mary Immaculate College, South Circular Road, Limerick ([www.mic.ul.ie](http://www.mic.ul.ie))**
  
  This programme, which is organised by the Department of Special Education, leads to the award of a Graduate Diploma in Special Education, accredited by the University of Limerick. The course offers an in-depth exploration of an SEN area of choice (Autism, Dyslexia, Attention Deficit Hyperactivity Disorder, Mild General Learning Disabilities, Emotional & Behavioural Disorders, Down Syndrome or other SEN areas) for each participant. The course runs from September 2014 to May 2015 and involves block release from school/centre for designated periods (a total of eight weeks), and four Saturdays. Those considering participation in this programme should contact the college for more details in relation to block release. Further details are available on the College website. Contact details are available at Appendix 2 of this circular.

- **National University of Ireland, Galway ([www.nuigalway.ie](http://www.nuigalway.ie))**
  
  This programme provided by the School of Education, leads to the award of a Postgraduate Diploma in Special Education. It runs from early September 2014 until May 2015 and involves release from schools/centres for designated block periods (a total of eight weeks over the academic year) to attend lectures and workshops at the University. In addition, teachers will be required to attend lectures and workshops at the University on four Saturdays. The programme also includes supervised work in the teachers’ own schools/centres and supported ongoing study throughout the year using a variety of modes of content delivery. Further details are available on the College website. Contact details are available at Appendix 2 of this circular.

- **St. Angela’s College, Sligo ([www.stangelas.nuigalway.ie](http://www.stangelas.nuigalway.ie))**
  
  This programme is organised by the Centre for Special Educational Needs, Inclusion and Diversity and leads to the award of a Post-Graduate Diploma in Special Education, accredited by the National University of Ireland, Galway. It runs from September 2014 until May 2015. The course is based on a combined approach of block release from school/centre for a total of eight weeks, four Saturdays of face-to-face tuition and distance learning, together with supervised work in the teachers’ own schools/centres. The programme also includes supported ongoing study throughout the year using a variety of modes of delivery. The programme structure is comprised of four core modules and a specialist study module. Participants can choose two
areas from the following range: Specific Learning Disabilities; Autistic Spectrum Disorders; Adult / Disadvantage / Intercultural Education; and Challenging Behaviour. Those considering participation in this programme should contact the college for more details in relation to block release. Contact details are available at Appendix 2 of this circular.

(e) St. Patrick’s College, Drumcondra, Dublin 9 (www.spd.dcu.ie)
The programme is organised by the College’s Department of Special Education, and leads to the award of a Graduate Diploma in Special Education, accredited by Dublin City University. The course runs from September 2014 to June 2015 and involves a blended model of delivery incorporating block release from school amounting to a total of eight weeks, online and distance learning and three weekends (Friday evening, Saturday) of face-to-face tuition. In order to participate in the programme, teachers will need access to a computer and broadband internet access. This course offers specialist pathways in moderate, severe and profound general learning disabilities and high incidence special educational needs. Further details are on the College website. Contact details are available at Appendix 2 of this circular.

(f) University College Cork (www.ucc.ie)
This programme is provided by the School of Education, UCC, and leads to the award of a Postgraduate Diploma in Special Education. It will run from September 2014 to May 2015 and involves a total of eight weeks block release from school/centre, four Saturdays, distance learning and supervised work in the teacher's own school/centre. Contact details are available at Appendix 2 of this circular.

(g) University College Dublin, Belfield, Dublin 4 (www.ucd.ie)
This programme, provided by the School of Education, leads to the award of the Graduate Diploma in Special Education. It will run from September 2014 to May 2015 and involves a blended model of delivery incorporating block release from school/centre amounting to a total of eight weeks, four Saturdays of collaborative workshops and seminars and ongoing supervised work in the participant's own school/centre. Those considering participation in this programme should contact the college for more details in relation to block release. Contact details are available at Appendix 2 of this circular.

6. **Eligibility**

Please note that all teachers must be registered in accordance with Section 31 of the Teaching Council Act, 2001. Please refer to the Teaching Council website www.teachingcouncil.ie for further information.

This programme is open to all serving teachers who are employed in a position funded by the Department of Education and Skills and who provide Learning Support and/or Resource Teaching in recognised Primary schools, Post-Primary schools, and other recognised Educational Services. Teachers serving in special schools and special classes are also eligible to apply. The programme is designed specifically to assist teachers in meeting the learning and teaching needs of students requiring learning support and/or students with special educational needs. Potential applicants must therefore have a teaching role in relation to students requiring learning support and/or students with special educational needs. Please refer to the circulars listed in Appendix 1 for information on the qualifications necessary for Learning Support/ Resource Teaching posts at Primary and Post-Primary levels and qualifications necessary to teach in Special Schools.

Please note that in order for teachers to be eligible to take up a place or continue on the course the necessary hours and facilities to enable full participation must be provided in their own school setting. It is particularly important that teachers participating in the Programme are given a work-load which will permit them to benefit fully from the continuing professional development being offered.
(a) **Primary:**

Teachers will be required to forward a copy of their Registration Certificate or Confirmation of Registration letter\(^1\) from the Teaching Council, when submitting their application form. If the “Education Sector(s)” field is blank, teachers will be required to provide evidence that they have qualifications suitable to teach in either the mainstream primary sector or to teach students with special educational needs or students requiring learning support in the primary sector.

Applicants from Primary Schools should have successfully completed their probationary period in accordance with the requirements as set out by the Teaching Council in their new publication *Procedures for Induction and Procedures and Criteria for Probation* and hold a position in a sanctioned post in an area of special education or learning support, or be taking up such posts in September 2014. For the purpose of the course, teachers will need to deliver a range of programmes related to the learning and teaching of students with special educational needs and/or those requiring learning support.\(^2\) Teachers’ timetables must also include periods during which they are working with small groups of students. Collaborative practices, such as team-teaching, can also form a part of these arrangements.

(b) **Post Primary**

Teachers will be required to forward a copy of their Registration Certificate or Confirmation of Registration letter (see footnote below) from the Teaching Council, when submitting their application form. If the “Education Sector(s)” field is blank, teachers will be required to provide evidence that they have qualifications suitable to teach in either the mainstream post-primary sector or to teach students with special educational needs or students requiring learning support in the post-primary sector.

Applicants from Post-Primary Schools should have successfully completed their Post Qualification Employment (PQE).

**Learning Support Teachers**

Qualified teachers who are assigned to Learning Support work should provide support for pupils requiring learning support for a **minimum** of 11 hours per week including in-class support. At least four class periods should be allocated to teaching individuals or groups of not more than six students. Additional time should also be made available for consultation with parents/guardians and colleagues. Together with work in numeracy, assigned Learning Support hours **must** include at least 4 class periods per week of literacy work (maintaining a focus on developing pupils’ literacy skills related to reading, writing, listening and speaking rather than focusing on language-based subject areas such as History/Geography).

**Resource Teachers**

Applications are invited from recognised second-level schools/centres that have been allocated resource posts or resource hours or officially sanctioned special classes. The person nominated must be a teacher eligible to hold a permanent post in recognised second level schools. In order to be eligible for the programme, teachers must spend a **minimum** of 11 hours per week including in-class support working with students who have special educational needs. For the purpose of the course, teachers will need to deliver a range of programmes related to the learning and teaching of students with special educational needs and/or those requiring learning support across the curriculum.

Teachers’ timetables must also include periods during which they are working with small groups of students. Collaborative practices, such as team-teaching, can also form a part of these arrangements.

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1 Confirmation of Registration letter is available to download from the Registered Teacher Login Facility on the Teaching Council website [www.teachingcouncil.ie](http://www.teachingcouncil.ie).

2 Please see the following links for definitions of Special Education /Learning Support categories as described in DES Circulars SP ED 02/05 - [http://www.education.ie/servlet/blobservlet/sp02_05.doc](http://www.education.ie/servlet/blobservlet/sp02_05.doc) and SP ED 08/02 - [http://www.education.ie/servlet/blobservlet/spedc08_02.pdf](http://www.education.ie/servlet/blobservlet/spedc08_02.pdf). The DES Circular SP ED 08/02 should be interpreted in accordance with the terms of circular SP 02/05. Please note that the General Allocation Model is not currently applicable at post-primary level.
(c) **Special Schools**

Teachers will be required to forward a copy of their Registration Certificate or Confirmation of Registration letter (see footnote 1 on page 4) from the Teaching Council, when submitting their application form. If the “Education Sector(s)” field is blank teachers will be required to provide evidence that they have qualifications suitable to teach either in the mainstream primary or post-primary sectors or to teach students with special educational needs or students requiring learning support in the primary or post-primary sector or to teach in special school settings.

Applicants from Special Schools should have successfully completed their probationary period in accordance with the requirements as set out by the Teaching Council in their new publication Procedures for Induction and Procedures and Criteria for Probation and hold a sanctioned post in a Special School or be taking up such posts in September 2014.

(d) **Other Educational Service**

Teachers will be required to forward a copy of their Registration Certificate or Confirmation of Registration letter (see footnote 1 on page 4) from the Teaching Council, when submitting their application form. If the “Education Sector(s)” field is blank teachers will be required to provide evidence that they have qualifications suitable to teach either in the mainstream primary or post-primary sectors or to teach students with special educational needs or students requiring learning support in the primary or post-primary sectors.

Applicants must have successfully completed their probationary period/PQE in accordance with Teaching Council requirements and be recognised as being eligible for permanent appointment in a primary, post-primary or special school. Applications are invited from qualified teachers employed by ETBs as literacy and/or numeracy tutors in Youthreach, Community Projects or in the Prison Service and who are assigned to Learning Support work for a minimum of 11 hours per week. At least four class periods should be allocated to teaching individuals or groups of not more than six students. Additional time should also be made available for consultation with parents/guardians and colleagues. Together with work in numeracy, assigned Learning Support hours must include at least 4 class periods per week of literacy work.

Candidates should note that evidence of having completed Garda vetting is required for participation in the course.

7. **Applications and Selection**

Applications must be returned to the College or University of choice by 5pm on 28th of February 2014.

*Applicants should retain evidence of postage.*

Priority will be given to teachers who meet the criteria and who have not already attended a similar post-graduate programme for Learning Support teachers or teachers of students with special educational needs recognised by the Department of Education and Skills.

Generally, only one application per School/Centre will be considered.

Candidates should note that some institutions require applicants to attend for interview.

It is intended that, on those programmes which accept primary and post-primary teachers, an equal number of places will be allocated to each group but the ratio may be modified in response to demand and local circumstances.

**The selection of participants from the eligible applicants will be a matter for the College/University authorities.**
8. **Programme Fees**

No fee or registration charges will apply for applicants eligible under the terms of this Circular.

9. **Extra Personal Vacation**

No extra personal vacation will be allowed in respect of attendance at the Programme.

10. **Substitution**

Substitution, which must be approved by the managerial authority of the school/ETB, will be allowed. The substitution must be deemed necessary to cover the approved periods of absence of the teacher from teaching duty for attendance at the course. Documentation from the College/University specifying the absence details must be retained by the school. **It should be noted that paid substitution cover will not be provided by the Department of Education and Skills where a teacher takes personal leave during the block release element of the programme.**

11. **Salary Arrangements**

All teachers on block release under the terms of this Programme will continue to receive their salary in the usual way.

12. **Allowances**

Please note that successful completion of this programme will not result in any entitlement to additional remuneration from the Department of Education and Skills.

13. **Travel and Subsistence**

Please note that there will be **no** reimbursement of any travel or subsistence expenses incurred by participants in the Programme which is the subject of this Circular.

14. **Masters Programme**

Those who successfully complete the Combined Post-Graduate Diploma Programme of Continuing Professional Development for Teachers involved in Learning Support and Special Education, and who meet entry requirements, are eligible to seek admission to a Masters Programme provided through the institutions listed in section 1 of this Circular. Further information is available on individual institutions' websites, details of which are included in Appendix 2.

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Eddie Ward  
Principal Officer  
January 2014
The following Circulars are available for download on the website of the Department of Education and Skills, www.education.ie:

SP ED 02/2005

0031/2011
0025/2013
0052/2013
Addresses of Colleges/Universities offering the Combined Post-Graduate Diploma Programme of Continuing Professional Development for Teachers involved in Learning Support and Special Education

1. Church of Ireland College of Education,  
   96 Upper Rathmines Road,  
   Rathmines,  
   Dublin 6.  
   www.cice.ie  
   Phone: (01) 4970033  
   Fax: (01) 4971932  
   Email: dmckeon@cice.ie

2. Mary Immaculate College,  
   Department of Special Education,  
   South Circular Road,  
   Limerick.  
   www.mic.ul.ie  
   Phone: (061) 204563  
   Fax: (061) 313632  
   Email: mairead.horan@mic.ul.ie

3. School of Education,  
   National University of Ireland,  
   University Road  
   Galway.  
   www.nuigalway.ie  
   Phone: (091) 492195  
   Fax: (091) 750538  
   Email: education@nuigalway.ie

4. St. Angela's College,  
   Centre for Special Educational Needs, Inclusion and Diversity,  
   Lough Gill,  
   Sligo.  
   www.stangelas.nuigalway.ie  
   Phone: (071) 9195551  
   Fax: (071) 9146510  
   Email: education@stangelas.nuigalway.ie

5. St. Patrick’s College,  
   Special Education Department,  
   Drumcondra,  
   Dublin 9.  
   wwwspd.dcu.ie  
   Phone: (01) 8842031  
   Fax: (01) 8842294  
   Email: SpEd.Office@spd.dcu.ie

6. Special Education Department,  
   School of Education,  
   Leeolme,  
   University College Cork,  
   Cork.  
   www.ucc.ie  
   Phone: (021) 4902465  
   Fax: (021) 4270291  
   Email: Dan.OSullivan@ucc.ie

7. School of Education,  
   Roebuck Castle,  
   University College Dublin,  
   Belfield,  
   Dublin 4.  
   www.ucd.ie  
   Phone: (01) 7167967  
   Fax: (01) 7161143  
   Email: ann.owens@ucd.ie
Application Form – Post-Primary Teachers – Circular 0001/2014

Combined Post-Graduate Diploma Programme of Continuing Professional Development for Teachers involved in Learning Support and Special Education – 2014/2015

To be completed by Teachers in Post-Primary Schools or in other Educational Services, e.g., Interventions, Youthreach, Prison Services, etc.

Please complete and return to the College/University of your choice by 28th of February 2014.

1. **Personal Details**

   Name: _______________________________ School: _______________________________
   
   Home Address: _______________________________ School Address: _______________________________
   
   ___________________________________________________________ ___________________________________________________________
   
   ___________________________________________________________ ___________________________________________________________
   
   Home Ph: _______________________________ School Roll No: _______________________________
   
   Mobile: _______________________________ School Phone: __________________ Fax: __________________
   
   Personal e-mail: _______________________________ School e-mail: __________________
   
   Teacher Payroll No: _______________________________ Principal: __________________

2. **Registration Details (Per Teaching Council Registration Certificate or Confirmation of Registration letter)**

   Teacher Registration Number __________________________ Education Sector _______________________________
   
   Do you hold current Garda Vetting? Yes ☐ /No ☐

   *A copy of the Registration Certificate or a Confirmation of Registration letter must accompany this form.

3. **Current Teaching Position**

   3 (a) Please tick which of the following best describes your current Employment Status:
   
   Permanent ☐
   
   Contract of Indefinite Duration (CID) ☐
   
   Fixed Term Contract ☐
   
   Other, please specify: ____________________________________________

   If employed in a part time capacity, for how many hours are you employed? ________________________
3 (b) Please tick which of the following best describes the teaching position you will hold in 2014/2015 (You may tick more than one box):

<table>
<thead>
<tr>
<th>Position</th>
<th>√ as appropriate</th>
<th>Position</th>
<th>√ as appropriate</th>
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<tbody>
<tr>
<td>Learning Support Hours in Mainstream</td>
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<td>Ex-quota Learning Support Post</td>
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<tr>
<td>Resource Post</td>
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<td>Teacher in Special Class</td>
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<td>Resource Hours in Mainstream</td>
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<td>Other: Please specify:</td>
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3 (c) Please state:

- Your total number of years teaching: __________________________________________
- Number of years teaching in your present school: ____________________________
- When were you appointed to your present LS/SEN post/hours? __________________
- Date of establishment of this LS/SEN post: _________________________________
- Have you been given timetabled hours for Learning Support work for the current year? (please state the number of hours): ____________________________
- Have you been given timetabled hours for Special Educational Needs work for the current year? (please state the number of hours): ____________________________

3 (d) Please state:

Number of students you are currently teaching in your capacity as indicated at 3 (c) above: __________

3 (e) Please state:

Number of timetabled hours you teach in mainstream classes: __________________________

3 (f) Have you been given timetabled hours for Learning Support work for 2014/2015: __________

If yes, please state the number of hours: ______________________________________

3 (g) Have you been given timetabled hours for Resource Teaching work for 2014/2015: __________

If yes, please state the number of hours: ______________________________________
3 (h) For the school year 2014/2015, how many hours per week will you be timetabled in the following areas of work:

Special Class (include designation of special class) ____________________

Withdrawal Work: _______________ Team-Teaching: _______________

Consultation with Colleagues/Parent/Others (please specify): ___________

Other (please specify): _______________

If your timetable has not yet been drawn up, please confirm with your principal that it will accord with the criteria in the accompanying circular:

I have certified with my principal that this will be the case: Yes: ☐ No: ☐

3 (i) Please state name, address and roll numbers of all the schools in which you currently teach, where applicable:

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
<th>Roll Number</th>
<th>DEIS School</th>
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4. Professional or other qualifications held:

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<tr>
<th>College, University or other Awarding Body</th>
<th>Dates of attendance and whether full-time or part-time</th>
<th>Degree or other Qualifications obtained/to be obtained</th>
<th>Grade/Class (if any)</th>
<th>Subject(s)</th>
<th>Date of Award</th>
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</table>
5. Previous Teaching Experience

5 (a) Number of years teaching mainstream classes: ____________________________

Name and Address of School(s) Dates

__________________________________________________________________________________________

____________________________________________________________________________________________

____________________________________________________________________________________________

____________________________________________________________________________________________

____________________________________________________________________________________________

____________________________________________________________________________________________

____________________________________________________________________________________________

5 (b) Prior to taking up your current position, please state number of years in:

   Special Schools _____ Special Classes _____ Learning Support Teaching _____

   Resource Teaching _____ Other (please specify) ______________________________

   Total _____

Name and Address of School(s) Dates

__________________________________________________________________________________________

____________________________________________________________________________________________

____________________________________________________________________________________________

____________________________________________________________________________________________

____________________________________________________________________________________________

____________________________________________________________________________________________

____________________________________________________________________________________________

____________________________________________________________________________________________
5 (c) Please provide details of any other relevant experience in educational settings e.g. subjects you currently teach:

____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________

6. Previous Professional Development courses attended (e.g. Induction, SESS, other CPD):

<table>
<thead>
<tr>
<th>Name &amp; Dates of Professional Development Course</th>
<th>Duration</th>
<th>Grade/Class (if any)</th>
<th>Subject(s)</th>
<th>Year of Completion of Professional Development Course</th>
<th>Accrediting Body</th>
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7. Details of other applications made

7 (a) Have you previously applied for the Learning Support/Special Education Course? Yes ☐ No ☐

If yes: What year

Which College/University
Have you applied to other Colleges/Universities for the 2014/2015 Programme? Yes ☐ No ☐

If yes: Which College/University ________________________________

I have read the description of the programme of continuing professional development as set out in Circular 0001/2014 and I agree to attend, in full, the Course for which I am making application and to fulfil the necessary conditions of such participation. I will notify my school authority of any absence from the course in accordance with normal procedures.

I confirm that I understand that

(1) successful completion of this Programme will not result in any entitlement to additional remuneration from the Department of Education and Skills,

(2) no travel or subsistence expenses will be met for participants in the Programme which is the subject of this Circular / application form, and

(3) evidence of having completed Garda vetting is required for participation in the course.

SIGNED: ________________________________ Date: __________________________

Please return completed application form, a copy of your Registration Certificate or a letter of confirmation of registration from the Teaching Council and the form to be completed by the school authorities to the College/University of your choice. Closing date for applications is 28th of February 2014

Thank you for your cooperation in completing this application form.
To be completed by the School Authorities

8 (a) Please state:

(i) The number of teachers with Learning Support/Special Education duties

(ii) The number of teachers who have qualifications in Learning Support/Resource Teaching/Special Education

(iii) How many of these teachers referred to at (ii) above are currently working in Learning Support/Special Education

8 (b) Please state:

(i) The number of students in Junior Cycle (2013/14)

(ii) The number of students in Senior Cycle (2013/14)

(iii) The number of students in Educational Service (2013/14)

8 (c) Please state the number of successful applications for the Learning Support/Special Education course which have been made by your school since 2009

8 (d) Please state the number of unsuccessful applications for the Learning Support/Special Education course which have been made by your school since 2009

8 (e) For what years were the applications at 8 (d) above made

Please attach a copy of the applicants 2014/2015 timetable incorporating the designated Learning Support/Resource hours. If it is not available please forward a copy, when completed, to the relevant College/University. Please note that teachers who will be attending the Course will be released for eight weeks over the academic year for which substitution will be provided.

Please note that it will only be possible for the teacher to take up a place or continue on the course if the necessary hours and facilities to enable full participation are provided. It is particularly important that teachers participating in the programme are given a work-load which will permit them to benefit fully from the continuing professional development being offered.
Please indicate, by category, how many students have been assessed as having special educational needs in your school

<table>
<thead>
<tr>
<th>Category of Special Need</th>
<th>Incidence</th>
<th>No of Students</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical Disability</td>
<td>Low</td>
<td></td>
</tr>
<tr>
<td>Hearing Impairment</td>
<td>Low</td>
<td></td>
</tr>
<tr>
<td>Visual Impairment</td>
<td>Low</td>
<td></td>
</tr>
<tr>
<td>Emotional Disturbance</td>
<td>Low</td>
<td></td>
</tr>
<tr>
<td>Borderline Mild General Learning Disability</td>
<td>High</td>
<td></td>
</tr>
<tr>
<td>Mild General Learning Disability</td>
<td>High</td>
<td></td>
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<td>Moderate General Learning Disability</td>
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<td>Multiple Disabilities</td>
<td>Low</td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td>Please specify</td>
<td></td>
</tr>
</tbody>
</table>

Please indicate how many students other than those listed at 8(f) would be in receipt of learning support?

________________________________________________________________________

I nominate ______________________ to attend this post-graduate programme and I confirm that the applicant for this combined course is a registered teacher in accordance with Section 31 of the Teaching Council Act, 2001.

I confirm that the candidate’s workload will permit them to benefit fully from the continuing professional development being offered and will accord with the criteria in Circular: 0001/2014.

I confirm that the detail contained within the candidate’s application form is correct and that the information in this application form is correct and, if the above named teacher is given a place on Combined Post-Graduate Diploma Programme of Continuing Professional Development for Teachers involved in Learning Support and Special Education –2014/2015, that the Board of Management agrees to release him/her to attend the programme and will fulfil all course requirements as specified in Circular 0001/2014. I undertake to ensure that the required substitution will be in place in a timely manner and I agree that I will not request the teacher to attend any school event for any reason during block release dates.

A copy of the Teacher Registration Certificate or a letter of confirmation of registration as provided by the Teaching Council must accompany this form.

SIGNED: _____________________________________________________________

(Principal)

DATE: __________________________________________________________________________

COUNTER SIGNED: ___________________________________________________________

(Director/Manager/Chief Executive/Chairperson of the Board of Management)

DATE: _______________________________________________________________________

Data Protection

The Department of Education and Skills will treat all personal data you provide on this form as confidential and will use them solely for the purpose intended. The information will only be disclosed as permitted by law or for the purposes listed in the Department’s registration with the Data Protection Commissioner (DPC) – Ref 10764/A.
The colleges listed within this document will treat all personal data you provide on this form as confidential and will use them solely for the purpose intended. The information will only be disclosed as permitted by law or for the purposes listed in their respective registrations.

If the information you have provided is to be used for purposes other than outlined in the Department’s or colleges’ (as applicable) registration with the DPC your permission will be sought.
To be completed by Teachers in Mainstream Primary and Special Schools

Please complete and return to the College/University of your choice by 28th of February 2014

1. **Personal Details**

Name: _____________________________________ School: ______________________________________

Home Address: _______________________________ School Address: _________________________________

____________________________________________

____________________________________________

____________________________________________

____________________________________________

Home Ph: ___________________________________ School Roll No: _________________________________

Mobile: _____________________________________ School Phone: ______________ Fax: ______________

Personal e-mail: ______________________________ School e-mail: __________________________________

Teacher Payroll No: ___________________________ Principal: ______________________________________

Please state Year of Probation: ______________________

2. **Registration Details (per Teaching Council Registration Certificate or per Confirmation of Registration letter)**

Teacher Registration Number ___________________ Education Sector _______________________________

Do you hold current Garda Vetting? Yes □ /No □

*A copy of the Teacher Registration Certificate or Confirmation of Registration letter must accompany this form.*

3. **Current Teaching Position**

3 (a) Please tick which of the following best describes your current Employment Status:

- Permanent □
- Contract of Indefinite Duration (CID) □
- Fixed Term Contract □
- Other, please specify: _______________________________________________________________

If employed in a part time capacity, for how many hours are you employed ______________________
3 (b) Please tick which of the following best describes the teaching position you will hold in 2014/2015:

<table>
<thead>
<tr>
<th>Position</th>
<th>√ as appropriate</th>
<th>Position</th>
<th>√ as appropriate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Learning Support</td>
<td>Teacher in a special class in a mainstream school</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Class Teacher in a special school</td>
<td>Subject Teacher in a special school</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Visiting teacher (specify SEN category and number on caseload)</td>
<td>Principal in a special school</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Resource Teacher in mainstream school</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Other (please specify)</td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>

Please state the number of students with SEN whom you are currently teaching in school: ____________________

Please give a brief description of the students (stating SEN category/ies) with whom you currently work:

_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

3 (c) Please state:

- Your total number of years teaching
- Number of years teaching in your present school
- When were you appointed to your present LS/SEN post/hours?
- Date of establishment of this LS/SEN post

3 (d) Please state:

Number of students you are currently teaching in your capacity as indicated at 3 (c) above: __________

3 (e) Number of years teaching mainstream classes: ____________________
3 (f) Please state name, address and roll numbers of all the schools in which you currently teach, where applicable:

<table>
<thead>
<tr>
<th>School Name</th>
<th>Address</th>
<th>Roll Number</th>
<th>DEIS category</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

4. Professional or other qualifications held

<table>
<thead>
<tr>
<th>College, University or other Awarding Body</th>
<th>Dates of attendance and whether full-time or part-time</th>
<th>Degree or other Qualifications obtained/to be obtained</th>
<th>Grade/Class (if any)</th>
<th>Subject(s)</th>
<th>Date of Award</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</table>
5. **Previous Teaching Experience**

5 (a) Prior to taking up your current position, please state number of years as a teacher in:

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<table>
<thead>
<tr>
<th></th>
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<tbody>
<tr>
<td>Special Schools</td>
<td></td>
<td>Special Classes</td>
</tr>
<tr>
<td>Learning Support Teaching</td>
<td></td>
<td>Resource Teaching</td>
</tr>
<tr>
<td>Other (please specify)</td>
<td></td>
<td>Total</td>
</tr>
</tbody>
</table>

Name and Address of School(s)                          Dates
(please specify teaching role)

<p>| | | |</p>
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</tbody>
</table>

5 (b) Please provide details of any other relevant experience in educational settings:

<p>| | | |</p>
<table>
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</tbody>
</table>
6. **Previous Professional Development (e.g. Induction, SESS, other CPD):**

<table>
<thead>
<tr>
<th>Name &amp; Dates of Professional Development Course</th>
<th>Duration</th>
<th>Grade/Class (if any)</th>
<th>Subject(s)</th>
<th>Year of Completion of Professional Development Course</th>
<th>Accrediting Body</th>
</tr>
</thead>
<tbody>
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</tr>
</tbody>
</table>

7. **Other applications made**

7 (a) Have you previously applied for the Learning Support/Special Education Course? Yes ☐ No ☐

If yes:
- What year? __________________________________________
- Which College/University? ____________________________

7 (b) Have you applied to other Colleges/Universities for this course for the 2014/2015 programme?

Yes ☐ No ☐

If yes:
- Which College/University ____________________________

I have read the description of the programme of continuing professional development as set out in Circular 0001/2014 and I agree to attend, in full, the course for which I am making application and fulfil the necessary conditions of such participation. I will notify my school authority of any absence from the course in accordance with normal procedures.

I confirm that I understand that

1. successful completion of this Programme will not result in any entitlement to additional remuneration from the Department of Education and Skills,
2. no travel or subsistence expenses will be met for participants in the Programme which is the subject of this Circular / application form, and
3. evidence of having completed Garda vetting is required for participation in the course.

SIGNED: ___________________________________ DATE: ______________________

Please return completed application form, a copy of your Registration Certificate or a letter of confirmation of registration from the Teaching Council, and the form to be completed by the school authorities to the College/University of your choice.

Closing date for applications is 28th of February, 2014

Thank you for your cooperation in completing this application form.
Principals of Mainstream Primary Schools should complete question 8 (a) to 8 (g)
Principals of Mainstream Primary Schools should complete question 8 (a) to 8 (g).

8. **To be completed by the School Authorities**

8 (a) Please state:

(i) The number of teachers with Learning Support/Special Education duties

(ii) The number of teachers who have qualifications in Learning Support/Resource Teaching/Special Education

(iii) How many of these teachers referred to at (ii) above are currently working in Learning Support/Special Education?

8 (b) Please state total number of students enrolled in the school

8 (c) Please state the number of successful applications for the Learning Support/Special Education course which have been made by your school since 2009

8 (d) Please state the number of unsuccessful applications for the Learning Support/Special Education course which have been made by your school since 2009

8 (e) For what years were the applications at 8 (d) above made:

Please note that teachers who will be attending the Course will be released for eight weeks over the academic year for which substitution will be provided.

Please note that it will only be possible for the teacher to take up a place or continue on the course if the necessary hours and facilities to enable full participation are provided. It is particularly important that teachers participating in the programme are given a work-load which will permit them to benefit fully from the continuing professional development being offered.
Please indicate, by category, how many students have been assessed as having special educational needs in your school

<table>
<thead>
<tr>
<th>Category of Special Need</th>
<th>Incidence</th>
<th>No of Students</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical Disability</td>
<td>Low</td>
<td>_____________</td>
</tr>
<tr>
<td>Hearing Impairment</td>
<td>Low</td>
<td>_____________</td>
</tr>
<tr>
<td>Visual Impairment</td>
<td>Low</td>
<td>_____________</td>
</tr>
<tr>
<td>Emotional Disturbance</td>
<td>Low</td>
<td>_____________</td>
</tr>
<tr>
<td>Borderline Mild General Learning Disability</td>
<td>High</td>
<td>_____________</td>
</tr>
<tr>
<td>Mild General Learning Disability</td>
<td>High</td>
<td>_____________</td>
</tr>
<tr>
<td>Moderate General Learning Disability</td>
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<td>_____________</td>
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<td>_____________</td>
</tr>
<tr>
<td>Multiple Disabilities</td>
<td>Low</td>
<td>_____________</td>
</tr>
</tbody>
</table>
| Other                                                         | Please specify | _______________

8 (g) Please indicate how many students are in receipt of LS hours: _______________________________________

I nominate __________________________ to attend this post-graduate programme and I confirm that the applicant for this combined course is a registered teacher in accordance with Section 31 of the Teaching Council Act, 2001.

I confirm that the candidate’s workload will permit them to benefit fully from the continuing professional development being offered and will accord with the criteria in Circular 0001/2014.

I confirm that the detail contained within the candidate’s application form is correct, that the information in this application form is correct and, if the above named teacher is given a place on Combined Post-Graduate Diploma Programme of Continuing Professional Development for Teachers involved in Learning Support and Special Education – 2014/2015 that the Board of Management agrees to release him/her to attend the programme and will fulfil all course requirements as specified in Circular 0001/2014. I undertake to ensure that the required substitution will be put in place in a timely manner and I agree that I will not request the teacher to attend any school event for any reason during block release dates.

A copy of the Teacher Registration Certificate or Confirmation of Registration letter must accompany this form.

SIGNED: _____________________________________________

(Principal)

DATE: _______________________________________________

COUNTER SIGNED: _____________________________________

(Director/Manager/Chief Executive Officer/Chairperson of the Board of Management)

DATE: _______________________________________________
Principals of Special Schools should complete question 9 (a) to 9 (g)
Principals of Special Schools should complete question 9 (a) to 9 (g).

9. To be completed by the School Authorities

9 (a) Please state:
   (i) The number of teachers in your school
       ____________________________________________
   (ii) The number of teachers who have qualifications in Learning Support/Resource Teaching/Special Education
       ____________________________________________

9 (b) Please state total number of students enrolled in your school
       ____________________________________________

9 (c) Please state the number of successful applications for the Special Education course which have been made by your school since 2009
       ____________________________________________

9 (d) Please state the number of unsuccessful applications for the Special Education course which have been made by your school since 2009
       ____________________________________________

9 (e) For what years were the above applications at 9 (d) above made:
       ____________________________________________

Please note that teachers who will be attending the Course will be released for eight weeks over the academic year for which substitution will be provided.

Please note that it will only be possible for the teacher to take up a place or continue on the course if the necessary hours and facilities to enable full participation are provided. It is particularly important that teachers participating in the programme are given a work-load which will permit them to benefit fully from the continuing professional development being offered.

9 (f) Please indicate, by primary category of disability, how many assessed students your school caters for:

<table>
<thead>
<tr>
<th>Category of Special Need</th>
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<td>Multiple Disabilities</td>
<td>Low</td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td>Please specify</td>
<td></td>
</tr>
</tbody>
</table>
9 (g) Please indicate the primary category of special educational need for which your school caters:

____________________________________________________________________________________________

____________________________________________________________________________________________

I nominate ___________________________ to attend this post-graduate programme and I confirm that the applicant for this combined course is a registered teacher in accordance with Section 31 of the Teaching Council Act, 2001.

I confirm that the candidate’s workload will permit them to benefit fully from the continuing professional development being offered and will accord with the criteria in Circular 0001/2014.

I confirm that the detail contained within the candidate’s application form is correct, that the information in this application form is correct and, if the above named teacher is given a place on Combined Post-Graduate Diploma Programme of Continuing Professional Development for Teachers involved in Learning Support and Special Education – 2014/2015, that the Board of Management agrees to release him/her to attend the programme and will fulfill all course requirements as specified in Circular 0001/2014. I undertake to ensure that the required substitution will be in place in a timely manner and I agree that I will not request the teacher to attend any school event for any reason during block release dates.

A copy of the Teacher Registration Certificate or Confirmation of Registration letter must accompany this form.

SIGNED: ____________________________________________

(Principal)

DATE: ____________________________________________

COUNTER SIGNED: __________________________________

(Director/Manager/Chief Executive/Chairperson of the Board of Management)

DATE: ____________________________________________

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