Primary Branch

To Boards of Management and Principals of National Schools

Payment of an allowance to recognised Teachers who hold a Graduate/ Higher Diploma In Special Educational Needs

1. Following consideration of a claim submitted to the Conciliation Council for Teachers an allowance will be paid to a recognised teacher who has been awarded a Graduate/ Higher Diploma In Special Educational Needs. The rate of allowance will be the same as the allowance paid to recognised teachers who completed the Advanced Diploma in Special Education from St Patrick's College of Education.

2. The allowance will be payable to recognised teachers subject to the following conditions:-

a) Successful completion of the graduate/higher diploma in Special Educational Needs (SEN) in one of five designated institutions. The five institutions involved are St. Patrick's College, Drumcondra, Dublin 9, Church of Ireland College of Education, Rathmines, Dublin 6, St. Angela's College, Lough Gill, Sligo, Mary Immaculate College, South Circular Road, Limerick, University College Dublin (NUI, Dublin), Belfield, Dublin 4;

b) A teacher must hold a full time position in a sanctioned post in an area of special education;

c) Teachers who voluntarily leave their SEN post within the school will not be entitled to retain the allowance;

d) Teachers, redeployed by school management from an SEN post to another post within a school within 4 years of receiving the allowance, will not be entitled to retain the allowance. A teacher who is redeployed by school management from an SEN post to another post within a school, or redeployed through the panel after completing 4 years in an SEN post may be entitled to retain the allowance subject to the teacher continuing to contribute to SEN within the school;

e) Teachers who are promoted to a post which entails them leaving their SEN post will not be entitled to retain the allowance.

3. Where a teacher ceases to be entitled to the payment of the allowance as per Sections 2 c, d and e, it is important that DES is informed immediately, to avoid overpayment.

4. Teachers who have successfully completed the Graduate/ Higher Diploma In Special Educational Needs should complete the attached claim form for payment of the appropriate allowance and forward it to the address specified on the form.

5. Please bring this Circular to the attention of all teaching staff.
6. Please provide a copy of this circular to members of the Board of Management.

A copy of this circular is also available on the Department of Education and Science website at www.education.ie

Johnny Bracken
Principal Officer
September, 2005
Application Form for Payment of an Allowance in respect of a Graduate/ Higher Diploma In Special Educational Needs

**Personal Details:**
Name: _____________________________________________________

Postal Address (as per payslip):_____________________________________________________
_____________________________________________________________

Date of Birth:   /   /                 Contact phone number ________________

**Employment Details**
Name of School:_______________________________________________________________

Address of School:_____________________________________________________________
_____________________________________________________________

Teacher No: ________________       School Roll No. ________________

**Details of Qualification**
Please state the full formal title of qualification for which allowance is now being claimed:

_____________________________________________________________________

Awarding Body:

_____________________________________________________________________

Date of completion of Course
_____________________________________________________________________

*A statement of results must be submitted with this application.*

Your application will not be processed unless the statement of results is submitted with this application.

I wish to claim for the allowance in respect of the Graduate/ Higher Diploma In Special Educational Needs.

I certify that I meet all the conditions for payment of the allowance.

Signed: ___________________________    Date:____________________

Please send to: Primary Administration Section 1, Department of Education and Science, Cornamaddy, Athlone, Co. Westmeath