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# Retrained Teacher Time Allowance Application

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| School information  |
| School name |  | School no. |  |
| Contact email |  |
| Teacher details |
| Teacher’s name |  |
| Teacher’s MOE number |  |
| Teaching Council Registration Number |  | FTTE |  |
| Tenure | [ ]  Permanent | [ ]  Fixed term |
| Start date |  | End date (if fixed term) |  |
| Course details |
| Course title |  |
| Awarding institution |  |
| Completion date |  |
| Teaching experience  |
| School | **Start date** | **End date** | **Tenure** |
|  |  |  |  |
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|  |  |  |  |
| Additional information |
| Is the teacher currently registered with the Teaching Council? | [ ]  Yes or Pending  |
| [ ] No |
| Is the teacher employed for at least 10 weeks / 1 term? | [ ]  Yes |
| [ ]  No |
| Is the teacher being paid from Teacher’s Salaries (11900), Study Award (11320) or Principal Sabbatical (11340)?*\* If the teacher will be charged to more than one funding code during the year. Please specify the dates in the notes section below.* | [ ]  Teacher’s Salaries |
| [ ] Study Award |
| [ ] Principal Sabbatical |
| Notes  |
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| Principal declarationI certify that I have checked the information on this form, to the best of my knowledge, is true and correct in every particular. |
| Principal’s name |  |
| Principal’s signature |  | Date |  |