Shared GAM/EAL Post for school year 2014/15

This form should only be completed if re-clustering applies to your school

School Name of	f the Base School for this post	Roll Number		
70 000 000 000 000		Email		
		Address		
		Phone No		
School Address		1 post = 25 h 0.8 = 20 h 0.6 = 15 h 0.4 = 10 h 0.2 = 5 hou	ours ours ours	
	14 February 2014 to:			
Primary Teacher A	llocations Section, Department of Education & S	Skills, Cornamaddy, Atl	hlone, Co. Westmeath	
Notification of an	our post agented by skystering CANA/CAL boy			
	new post created by clustering GAM/EAL hou beleted only if your school is a Base School for		<u> </u>	
-	t you check the GAM/EAL approved hours	-		this
form.	o you dison the Crima 2.12 approved notice	C.11 	. cerete compressing	******
If your school is t post.	the base school for more than one clustered p	post, a separate form	must be submitted for	or each
	School Name	Roll Number	GAM/EAL hours in this clustered post	
Base School				
2 nd school				
3 rd school				
4 th school				
5 th school				
there is a quarter of the second of	or s in the cluster agree to end the cluster arrangement can only be made if: or	gement.	·	nt school
	above information is correct and that I am in this post as outlined above.	r agreement with the	proposed cluster	
Principal / Chairpers	Roll no son B.O.M. of the base school for the cluster	Date		
Principal / Chairpers	Roll no son B.O.M. of the second school in the cluster	Date		
	Roll noson B.O.M. of the third school in the cluster	Date		
Principal / Chairpers	Roll noson B.O.M. of the fourth school in the cluster	Date		
I F	Roll no	Date		

Principal / Chairperson B.O.M. of the fifth school in the cluster