



EMPLOYEE COMMENCEMENT FORM

Please complete all sections below in BLOCK CAPITALS ensuring that the form is filled in completely and accurately. Note that failure to complete the form in full or supplying inaccurate information can result in a delay in payment of wages/salary. Completed signed forms should be returned to the School/College office as soon as possible.

Post Title:					
School/College/Centre:					
Title (Dr/Mr/Ms/Fr/Sr):					
Forename*:		Known As**:			
Surname*:					
* Your CETB email account will be a combination of your surname/forename unless you specify a different name in the 'Known as' field in which case it will be a combination of surname/known as.					
** Please note that nicknames should not be entered in the 'Known as' field.					
Address for correspondence:					
PPS Number:					
Nationality:					
Phone No:		Mobile:			
Gender:		Female:			
Male:		Female:			
Email Address (personal): ***					
*** Please note that once you are set up as an employee of CETB, you will be assigned an official CETB email address and all future correspondence will issue to the corporate email address, not your personal email address. (Staff engaged on a short term casual basis may not be issued with a corporate email address initially and will be contacted on their personal address if necessary)					
Date of Birth: (dd/mm/yyyy)					
Teacher Council Registration No:		Date of Registration:			
Registered Subject(s):					
Proposed Commencement Date:					
Payment Details (Paypath):					
Name of Bank/Building Society & Address:					
IBAN:					
BIC:					
Do you have employment <u>outside</u> Cork ETB? Yes <input type="checkbox"/> No <input type="checkbox"/>					
If, Yes, please complete the following section					
Other Employment Details					
Name of Employer:					
Position held:					
No. of Hours worked per week:					
EMPLOYMENT HISTORY					
Have you previously worked with Cork ETB		Yes		No	
If, yes, please provide your previous employee number if known:					
Post held:					
School/College name:					

PREVIOUS PUBLIC SECTOR EMPLOYMENT

Please be advised that unless documentary evidence as outlined below is attached to your application, all new employees will be paid at the New Entrant pay scales as set out by DES. It is the responsibility of the employee to provide such evidence. Applicants should refer to www.education.ie > Education Personnel>Payroll>Teachers for current information regarding the pay scales applying to Teachers appointed after 01 January, 2011.

Have you worked in the Public Sector prior to 01 January 2011 Yes No

If, YES, please submit a statement from each Previous Public Sector Employer confirming the following:

- (1) Name & Address of Previous Employer; (2) Date(s) of Employment – From/To
 (3) Title of Post Held (4) Rate of Pay applicable to the Post

Are you currently on Leave of Absence from a Public Sector Employer? Yes No

If, Yes, please state the scheme of leave and date of commencement of leave: *e.g. career break, etc.*

Scheme:

Start Date:

Have you availed of any Redundancy/Early Retirement Scheme? Yes No

If, Yes, please state scheme and date of entry to scheme:

Scheme:

Date of Entry:

Pension Details (Where applicable)

Were you in employment in a Public Service Organisation on 1 April, 2004. Yes No

Are you in receipt of a Pension in respect of any previous employment in (Tick as appropriate)

Education Sector:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Public Service:	Yes <input type="checkbox"/>	No <input type="checkbox"/>

If yes to either of the above, please state type of pension and Strand where applicable.

Next Of Kin Details:

Surname:		
Forename:		
Address:		
Relationship:		
Phone No:		
Dependants: (under 18 or under 21 if in full-time education)	Name(s)	Date(s) of Birth

CERTIFICATE OF TAX FREE ALLOWANCE AND EVIDENCE OF PPS

- ❖ *If this is your first employment in Ireland, please ensure you log into your My Account page on www.revenue.ie in order to register your employment with Cork ETB. Our employer's registered number is 3185254WH.*
- ❖ *Evidence of PPS Number (see below) **NOTE: YOU WILL NOT BE SET UP FOR PAYMENT UNLESS SATISFACTORY EVIDENCE AS OUTLINED BELOW IS RECEIVED.***

ACKNOWLEDGEMENTS AND DECLARATIONS (Please tick each section to confirm)**✚ Payment of Wages**

I hereby acknowledge that:-

- (i) My Salary/Wage will be paid into my bank account fortnightly
- (ii) It is my responsibility to return completed timesheets each week/month, as applicable, by the agreed deadline to the nominated person in the School/College/Centre. Timesheets must be returned each week/month, as applicable, and should not be held for hours to accrue. I accept that failure to comply with this may result in non-payment of salary.

✚ I undertake to repay any payments lodged to my Bank Account to which I am not rightfully entitled.

✚ I acknowledge that it is my responsibility to provide Human Resources with evidence of Public Sector employment prior to 01 January 2011 to determine whether or not New Entrant rates of pay apply and that payment at the New Entrant Rates of Pay will apply pending the submission of such evidence.

✚ I acknowledge that it is my responsibility to notify Human Resources of any changes pertaining to the above information as supplied by me on my application.

✚ I declare that all information from me in relation to the above is both true and accurate and I accept that my employment terminated should the contrary prove to be the case.

✚ I acknowledge that failure to complete a Form of Undertaking (see Statutory Declaration) and provide proof of identity prior to or on the first day of appointment before commencing to teach may result in the offer of appointment being withdrawn.

❖ **IMPORTANT:** Only those teachers registered with the Teaching Council of Ireland for the subject area(s) in which any offer of appointment is made can be paid the fully qualified rate.

I declare that all information from me in relation to the above is both true and accurate.

Signed: _____ Dated: _____

Print Name: _____ (BLOCK CAPITALS)

Please return this form to the Human Resources Department or the nominated staff member in the School/College/Centre Office as appropriate.

IMPORTANT INFORMATION FOR NEW APPOINTEES
PLEASE READ CAREFULLY

PPS Number:

To comply with Audit Regulations, it is necessary for us to ensure that all PPS numbers submitted are valid. A copy of any one of the following documents will suffice:

- A certificate of tax credits and standard rate cut-off point in respect of a previous employment
- A P45 from a previous employment which shows your PPS number in respect of the current or previous year of assessment
- Public Services Card, Social Welfare Services Card, or PPS Registration Letter issued by the Department of Social Protection
- A P21 Balancing Statement
- A P60 issued by a former employer, which shows your PPS Number
- Any other items of correspondence from the tax office, which specifically quotes your PPS number
- A Payslip from a previous employer which shows your PPS Number.

Tax Details:

- If this is your first employment in Ireland, please ensure you log into your My Account page on www.revenue.ie in order to register your employment with Cork ETB. Our employer's registered number is 3185254WH.
- **Please remember that all new employees are put on emergency tax, and if your tax affairs are not in order, this will result in you paying the higher rate of tax on all your earnings within 8 weeks of starting employment.**