## REQUEST FOR PATRON'S SANCTION FOR APPOINTMENT OF S.N.A.

Schoo	l: Roll No.:
Addre	SS:
Dear E	Bishop Gavin,
Follov	ving the recommendation of the Selection Interviewing Board comprising of:
1	23
The B	oard of Management of the above school seeks your approval to appoint:
Succes	ssful Applicant:
Postal	Address:
Qualif	fications:
Post:	Commencement Date:
	anent S.N.A. Fixed Term S.N.A.  Stute/Maternity Leave S.N.A.  Part-time: Hours:
Signe	d S.N.A. Redeployment Form Yes No
As Ch	airperson of the Board of Management, I confirm that (please tick)
	Rules and Procedures as set out in Section 10 of D.E.S. Circular 0051/2019
	References of successful candidate have been checked by the Selection Board All records in relation to the selection process are in order and will be kept by the Chairperson for
	a minimum period of eighteen months.
	Satisfactory Garda Vetting has been submitted by teacher and has signed Form of Undertaking and Statutory Declaration
	Satisfactory Medical Fitness Certificate has been obtained (if applicable).
	Circular 37/2013 (S.N.A.s – Supplementary Assignment Arrangements) has been complied with.
Sig	gned:
	Chairperson of Board of Management
Da	te:
<u> </u>	list, in order of merit, of other candidates who are also deemed suitable shall be retained, by the
	Chairperson, for use in the event of the post not being filled by the successful applicant.