



APPLICATION FOR HOME TUITION 2008/2009 SCHOOL YEAR

Parents, please read the following information carefully in conjunction with circular 0075/2008 before completing application form.

Section 1 must be completed by all applicants.

Section 2 comprises three subsections **only one of which will be appropriate.**

Section 2(a) should be completed in respect of children applying for tuition where a significant medical condition is likely to cause major disruption to their attendance at school on a continuing basis.

Section 2(b) should be completed in respect of children with Special Educational Needs applying for tuition as an interim measure whilst awaiting a school placement. It should be noted that regular reports will be requested on the up-to-date position regarding placement during the year. Home tuition will only be sanctioned for these children on a term-by-term basis. Details of these children will be shared with the National Council for Special Education (NCSE) to assist in sourcing a school placement.

Section 2(c) should be completed in respect of children over 2 ½ years of age with an Autism Spectrum Disorder actively seeking an early educational intervention placement. It should be noted that parents/guardians of children seeking early intervention must supply all relevant information to the NCSE – including all psychological and any other professional reports on the child, so that the planning process for the child's future educational provisions can start at the earliest opportunity. Where a child is attending a HSE early intervention service/pre-school, attendance will be taken into consideration in determining allocation.

- Home Tuition is for educational intervention only. The provision of therapeutic services such as Speech and Language Therapy, Occupational Therapy, Psychological services etc are a matter for the Health Service Executive (HSE). Therefore Home Tuition grants must not be used under any circumstances to fund these or any other health related supports.
- Details and qualifications of proposed tutor must be included in the application form. Proposed tutors must submit a photographic form of identification displaying their signature e.g. copy of driving licence or passport. This may be submitted with the Home Tuition application form or directly to the Home Tuition section, indicating the name of the child to whom he/she will be delivering Home Tuition. Sanction of Home Tuition will only be given when full details of the proposed tutor are provided to the Department of Education and Science and the application has been fully completed. No arrangements should be entered into with tutors in anticipation of funding until confirmation of sanction has been granted by the Department. Retrospective Grant Claim Forms will not be processed.
- As tuition takes place outside the usual school structure it is important that home tutors are qualified to provide an educational programme and you should seek to recruit a fully qualified teacher. In the event that a fully qualified teacher is unavailable, other qualifications are acceptable as an interim measure - see appropriate qualifications below.

- Copies of recent psychological assessments/professional reports should be attached. All reports submitted will be shared with the NCSE to assist in the planning of appropriate education provision for children.
- Please note that all information pertaining to this application will be shared between the Department and the NCSE.
- Contact details for the Special Educational Needs Organiser (SENO) are available on www.ncse.ie.
- **Declaration on page 7** must be completed in respect of each application.

➤ **It should be noted that the following periods will not be covered for payment for any pupil availing of the Home Tuition Scheme:**

<u>October 2008 mid-term break:</u>	27th to 31st October inclusive
<u>Christmas 2008:</u>	24th December 2008 to 6th January 2009 inclusive
<u>February 2009 mid-term break:</u>	16th February 2009 to 20th February 2009 inclusive
<u>Easter 2009:</u>	6th April 2009 to 17th April 2009 inclusive

- Failure to complete the form in full may result in delays. In some instances the form may need to be returned to you for completion. Sanction will not be backdated in respect of incomplete forms.
- It should be noted that as these tutors are not employed directly by schools or the Department of Education and Science that they are not subject to the vetting process. It is recommended that parents/guardians take usual precautions in this regard, for example, parents should not leave a child alone with the tutor.

Acceptable Tuition Provider's Qualifications

APPENDIX A

The Home Tuition Scheme Acceptable Qualifications for Home Tuition Providers

A recognised teaching qualification for the relevant age-group;

A recognised teaching qualification – B.Ed; H.Dip in Education, Montessori Qualification – successfully completed either (a) the 3 year full-time course at Montessori College in Milltown or (b) National Diploma/Degree in Humanities in Montessori in St. Nicholas College, Dun Laoghaire; Qualified Teacher Status from UK;

Please note that the Department's qualification preference is for a fully qualified teacher. Where parents cannot recruit a fully qualified teacher, then some alternative qualifications are acceptable including the following:

- A qualification in autism (an autism specific qualification) – from St. Patrick's College of Education, Drumcondra, or Birmingham University, or other UK University; (or US/Australia) or a qualification in an applied approach to teaching pupils with autism – in ABA, PECS, TEACCH. This should be an official certificate or diploma course ratified by a university, college or organisation. (A short course or a certificate from school etc is not acceptable); or

As an interim measure third level qualification B.A., B.Sc., Psychology, RNMH etc. may also be appropriate depending on circumstances.

SECTION 1: PERSONAL DETAILS
(To be completed by Parents/Guardian)

Name of Pupil: _____ **Date of Birth:** _____

Pupil PPS number: _____

Has your child previously received home tuition? Yes No

Home Address: _____

Name of Parent/Guardian: _____

Telephone No: _____

Email Address: _____

FOR COMPLETION BY PROPOSED TUTOR

Please give details of current or proposed home tuition programme:

Tutor Name:	
Address :	
Telephone No :	
Teaching Council of Ireland No.	
Qualifications :	
School Roll No:	
Teachers PPSN :	

Where Teaching Council No. is not applicable, please forward copy of relevant qualification.

Has ID been submitted with application form? Yes No

Please indicate: Drivers Licence Passport

Has ID been submitted previously? Yes No

Tutor must give details of other children to whom he/she is delivering tuition under the Home Tuition Scheme: _____

Home tuition grants are sanctioned to provide an individualised educational programme. Tutors must therefore provide tuition on a 1:1 basis and may not give more than 48 hours tuition in any week

Tutors Signature: _____

SECTION 2: COMPRISES 3 SUBSECTIONS ONLY ONE OF WHICH MUST BE COMPLETED BY EACH APPLICANT (A), (B) OR (C)

SECTION 2 (A): MEDICAL DETAILS

TO BE COMPLETED BY CHILD'S DOCTOR.

Name of child: _____

Child's medical condition:

Will this medical condition, in your opinion, continue to result in recurring disruptions for long periods to the child's school attendance? :

(1) During the current school year? Yes No

(2) In subsequent school years? Yes No

(3) Estimate length of time absence is likely to occur: _____

Name of Doctor: _____

Address: _____

Phone No: _____

Doctor's Signature: _____ Date: _____

TO BE COMPLETED BY SCHOOL PRINCIPAL

Is the child currently attending school? Yes No

If yes, state class level / year: _____

Name of School: _____ School Roll No: _____

Address: _____

Telephone Number: _____ Email Address:: _____

Number of Days on which:	2007/2008	Sept 08 to Date
(a) the school was open:		
(b) the child attended:		

Signature of School Principal: _____ Date: _____

SECTION 2 (B): To be completed in respect of children with Special Educational Needs who are awaiting an educational placement.

Name of child: _____

Reason child is not attending school: _____

*(Please enclose most recent psychological / other relevant professional reports, if not already submitted to the Department)

I confirm that I have consulted with National Council Special Education with regard to sourcing an educational placement and supplied to the NCSE all the relevant associated reports.

Signature of parent /guardian: _____

It should be noted that regular reports will be requested on the up-to-date position regarding placement during the year.

To be completed by Special Educational Needs Organiser:

I confirm that there is currently no educational placement available to the above named child and furthermore I have been furnished with relevant assessments/reports to assist the NCSE with sourcing an educational placement.

(If appropriate) There will be a placement available in:

_____ (School) _____ (Roll Number)

Address: _____

expected commencement date: _____

Signed By SENO: _____

Date: _____

SECTION 2 (C)

To be completed by applicants in respect of children with an Autism Spectrum Disorder aged 2 ½ years to 5 with a confirmed diagnosis of autism. Copies of recent professional reports should be attached. Please note that a diagnosis stating a child has autistic traits is not acceptable in this context.

Name of child: _____

I confirm that there is no early intervention/school placement available for my child currently. I have consulted with National Council for Special Education with regard to sourcing an educational placement and supplied to the NCSE all the relevant associated reports.

Details of the school in which the child is to be enrolled must be forwarded to the Department by December of the school year in which the child turns 5 years of age.

Signature of parent/guardian: _____

To be completed by Special Educational Needs Organiser:

I confirm that there is currently no educational placement available to the above named child and furthermore I have been furnished with relevant assessments/reports to assist the NCSE with sourcing an educational placement.

(If appropriate) There will be a placement available in:

_____ (School) _____ (Roll Number)

Address: _____

Expected commencement date: _____

Signed By SENO: _____

Date: _____

To be completed by Early Intervention / Pre-School Manager if applicable

Is the child currently attending pre-school/ special pre-school? _____

Number of hours per week (please specify): _____

Name of Facility: _____ Telephone No: _____

Signature of Manager: _____

School Address: _____

Email Address: _____

Website Address: _____

DECLARATION

I consent to have this application form and any associated documents considered by the Department of Education and Science or any nominee of the Department of Education and Science if this is considered appropriate by the Department. In addition I consent to have _____ (child's name) assessed by a psychologist nominated by the Department should the Department consider it necessary.

Signed: _____

(1) I DECLARE THAT THE INFORMATION CONTAINED IN THIS FORM IS ACCURATE TO THE BEST OF MY KNOWLEDGE.

(2) I HAVE CAREFULLY READ AND UNDERSTAND CIRCULAR AND PAGES 1 & 2 OF THIS FORM.

**Signature of Parent /
Guardian:**

Date:

COMPLETED FORMS SHOULD BE RETURNED TO THE FOLLOWING ADDRESS:

**Home Tuition Unit,
Special Education Section,
Department of Education and Science,
Cornamaddy,
Athlone,
Co. Westmeath.**