

National Training Programme for Special Needs Assistants (SNAs)

*The Certificate in Inclusive Support and Care in Education for Special Needs Assistants
(SNAs) (Level 6)*

PRINCIPALS DECLARATION FORM

The Department of Education fully funds the National Training Programme for SNAs. A SNA must be employed in a school with a roll number to be eligible for the programme.

Please complete the sections below and provide a signature, declaring that you consent to the school's roll number being used to support the application.

You may complete a Declaration Form for more than one SNA if more than one SNA from your school applies for the programme.

To be completed by the School Principal:

School Information:

Principal:

School:

School Roll Number:

School Address:

Eircode:

School Phone Number:

Type of School:

Please tick one:

Mainstream Primary:

Mainstream Post-primary:

Special School:

Special Class:

SNA Support:

Please tick one:

Full-time:

Part-time:

Substitute:

Declaration:

I, _____ certify that _____ is currently working in the above-named school as a SNA. I further acknowledge that the information contained in this application form is true and accurate, and that the Special Needs Assistant fulfils the requirements of the course.

Principal's Signature

Date