

Irish National Teachers' Organisation

APPLICATION FORM FOR MEMBERSHIP

I hereby authorise the Department of Education and Science to deduct from my salary, until further notice from INTO Head Office (see Rule 74), the appropriate subscription to be paid to the INTO on my behalf, the amount of subscription to be determined from time to time in accordance with INTO Rules.

Teacher Reference No (Payroll Code): _____ School Roll No: _____

First Name: _____

Surname: _____ Male/Female: _____

Name before Marriage (if applicable): _____ Date of Birth: _____

School Name: _____

School Address: _____ Branch: _____

Personal E-mail Address: _____

College of Education attended: _____

Years of training: (From) _____ (To) _____

Qualifications Obtained: _____

State whether appointment is permanent or temporary: _____

Date of First appointment by DES: _____

If out of service for any period please state date of resignation: _____ Date of reappointment: _____

Are you paid directly by the Department of Education and Science? Yes No

Home address: _____

Home Phone No: _____ School Phone No: _____ Mobile No: _____

I wish to join the Irish National Teachers' Organisation and hereby undertake, if accepted as a member, to abide loyally by the Rules of the Organisation and to use my best endeavours to promote its objectives and interests.

Signed: _____ Date: _____

To be completed by the Branch Secretary

Branch: _____ Signed: _____ Date: _____

Completed application form received on: / / Applicant was accepted as a member of this Branch on: / /

Office Use Only: Date of Input / / Deduct. Commence / /