|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **B** | | **SCHOOL INFORMATION FORM S.CG.**  Please complete the form carefully and return by email to [scginfo@mie.ie](mailto:scginfo@mie.ie) by 31st October 2020 | | | | | | | **SCG** |
| **SCHOOL EIRCODE:** |  |  |  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| *Please use block letters:* | | | | | | | | | | | | | | | | | | | |
| **FIRST NAME(S):** |  | | | | | | | | | | | | | | | | | | |
| **SURNAME:** |  | | | | | | | | | | | | | | | | | | |
| **Email address:** |  | | | | | | | | | | | | | | | | | | |
| **P.P.S. NUMBER:** |  | |  | |  | |  | | |  |  | |  | |  | |  | |  |
| **DATE OF BIRTH:** |  | |  | |  | |  | | |  |  | |  | |  | |  | |  |
| **SCG SCHOOL VISIT:** | | | | | | | | | | | | | | | | | | | |
| **You will receive 1 visit in the period 13 Jan. – 26 Feb. 2021. Your visit supervisor will notify you in advance of the visit of the day and time of the visit. It is your responsibility to make yourself available on the day and time of the visit(s).** | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | Please indicate modules you are undertaking | | | | | | | | | | | |
| PAPER 1 - TEACHING OF IRISH ASSESSMENT | | | | | | | |  | | | | | | | | | | | |
| PAPER 2 – LANGUAGE AND CULTURE PROJECT | | | | | | | |  | | | | | | | | | | | |
| **SCHOOL NAME:** | |  | | | | | | | | | | | | | | | | | |
| **SCHOOL ADDRESS:** | |  | | | | | | | | | | | | | | | | | |
| **COUNTY:** | |  | | | | | | | | | | | | | | | | | |
| **SCHOOL EIRCODE** | |  | |  | |  | | |  | | |  | |  | |  | |  | |
| **SCHOOL TELEPHONE NUMBER:** | |  | | | | | | | | | | | | | | | | | |
| **SCHOOL ROLL NUMBER:** | |  | | | | | | | | | | | | | | | | | |
| **SCHOOL OPENING TIME:** | |  | | | | | | | | | | | | | | | | | |
| **MORNING BREAK TIME:** | | **From to** | | | | | | | | | | | | | | | | | |
| **LUNCH BREAK TIME:** | | **From to** | | | | | | | | | | | | | | | | | |
| **CLOSING TIME:** | |  | | | | | | | | | | | | | | | | | |
| **CLASS LEVEL YOU WILL BE TEACHING:** | |  | | | | | | | | | | | | | | | | | |
| **NAME OF SCHOOL PRINCIPAL:** | |  | | | | | | | | | | | | | | | | | |
| **SCHOOL PRINCIPAL’S Email address** | |  | | | | | | | | | | | | | | | | | |
| **DO YOU HAVE THE PERMISSION OF SCHOOL PRINCIPAL TO UNDERTAKE SCHOOL VISIT IN THIS SCHOOL?** | |  | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | |

**Complete and email Form A if undertaking the SCG**

**Complete and attach Form B if undertaking SCG SCHOOL PRACTICAL ELEMENTS**

**Complete and attach Form C if seeking an Exemption from parts of the SCG**

**You should forward completed form and any attached Forms in 1 email to** [**scginfo@mie.ie**](mailto:scginfo@mie.ie)**. (DO NOT POST THE FORM)**

If you have a query in relation to the completion of this form then please contact [scginfo@mie.ie](mailto:scginfo@mie.ie).

Full details of school practical elements are available in *Cóir Ghaoithe* Syllabus Textbook.