

Non-Teaching Staff Application for Work-Sharing Scheme

Name:	
School/Centre:	
Grade/Job title:	
Reason for work-share request:	
Are you currently work-sharing:	
If yes, how many years:	
Additional information/comments:	

Declaration:

I declare that I have read and agree to abide by the regulations and procedures set out in Circular Letter 0037/2006 governing this leave and that the information which I have given in this application to be true and accurate.

Signed (Staff Member): _____

Date: _____

Signature _____

Date: _____

(Principal / Centre Head.)

For LMETB Head Office Completion:

Approved

☐

Refused

☐

Comments: _____

Signed: _____

Date: _____

Brian Murphy, Director of Organisation Support & Development / Sadie Ward McDermott, Director of Further Ed

Please return this application form to: leaveapplications@lmetb.ie