



Please refer to Circular 0139/2006 for further information

### Appendix 3 - Deferral/withdrawal of Increment(s)

Form DEF-INC

To: SNA Payroll Division

#### Deferral/withdrawal of Increment(s)

School Name: \_\_\_\_\_

School Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

School Telephone Number: \_\_\_\_\_

School Roll No.: \_\_\_\_\_

**The service of the Special Needs Assistant below has been assessed and their service has been deemed unsatisfactory.**

Name: \_\_\_\_\_

PPS No. \_\_\_\_\_

**The Board of Management/Management Authority has decided that the following action would be taken:**

1. Withhold SNA's next increment until \_\_\_\_\_ (date)
2. Withdraw \_\_\_\_\_ (number) of increments from \_\_\_\_\_ (date)

Signed: \_\_\_\_\_ (Chairperson to BOM/CEO)

DATE: \_\_\_\_\_

**This form should be returned to the Payroll Service of the Dept. of Education & Science/VEC immediately following the decision of the Board of Management/Management Authority.**

Completed forms should be returned as follows:

In the case of a SNA employed in a Primary, Secondary, Community or Comprehensive School: SNA Payroll Division, Dept. of Education & Science, Cornamaddy, Athlone, Co. Westmeath.

In the case of a SNA employed in a Vocational School or Community College to The CEO of the Vocational Educational Committee by which the SNA is employed.