

CHANGE OF DETAILS FORM (QUALIFICATIONS UPDATE)

THIS FORM MUST BE
ACCOMPANIED BY
ORIGINAL TRANSCRIPTS

FORM: COD-03

Use this form to update your registration details. Please complete all relevant sections in black ink and BLOCK CAPITALS

You can use this form to update details of your qualifications on the register of the Teaching Council. The Council will update a teacher's qualifications if original transcripts for the qualification are enclosed with this form. (Copies or certified copies will not suffice). Based on the transcripts, the Council may also update your registration details as appropriate. Please note that this form cannot be used for the purpose of seeking assessment of qualifications. Teachers are advised to submit all documentation via registered post. The Council will return the documents via registered post.

Part A: Your details

Your Name:	Title:	<input type="text"/>	Forename(s)	<input type="text"/>				
			Surname:	<input type="text"/>				
Date of Birth:	<input type="text" value="DD"/>	<input type="text" value="MM"/>	<input type="text" value="YYYY"/>	Registration No:	<input type="text"/>			
PPS Number:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Payroll/ Teacher No:	<input type="text"/>		
Signature:	<input type="text"/>				Date of Signature:	<input type="text" value="DD"/>	<input type="text" value="MM"/>	<input type="text" value="YYYY"/>

Part B: Authorisation to allow paymaster to view details

To facilitate a paymaster in calculating the correct qualification allowance(s), a teacher authorise the Council to allow their paymaster view their qualifications details. This may remove the requirement of providing original transcripts to a paymaster.

I authorise the Teaching Council to allow my qualifications details to be viewed by my Paymaster i.e. Department of Education and Science or Vocational Education Committee. Yes
No

Part C: Qualification details

Please enter the details of your qualifications below:

Qualification Title:	<input type="text"/>		
College of Study:	<input type="text"/>		
Year of Award:	<input type="text"/>	Result (Grade):	<input type="text"/>
Final Year Subjects:	<input type="text"/>		
Transcripts Enclosed:	Yes <input type="checkbox"/>	No	<input type="checkbox"/>

If you have more than one qualification to update, please provide the details on a separate sheet.

THIS FORM MUST BE ACCOMPANIED BY ORIGINAL TRANSCRIPTS