

State Examinations 2023

Claim for Refund of fees paid for Practical/Aural/Computer Science/LCVP/Listed LCA Subjects

Name (Block Capitals) ____ PPS No: ____ School Name: School Roll No: ____ PRACTICALS/LCVP/COMPUTER SCIENCE SUBJECT Total Number of Candidates Total Number of Days Claimed COMPUTER SCIENCE LCVP ENGINEERING CONSTRUCTION ART

AURALS			
SUBJECT	Total Number of Candidates	Total Number of Superintendent Sessions Claimed	
IRISH			
FRENCH			
GERMAN			
SPANISH			
RUSSIAN			
ITALIAN			
JAPANESE			
MANDARIN CHINESE			
PORTUGUESE			
POLISH			
LITHUANIAN			
MUSIC			

LEAVING CERTIFICATE APPLIED			
SUBJECT	Total Number of candidates	Total Number of Superintendent Sessions Claimed	
INFORMATION AND COMMUNICATION TECHNOLOGY (ICT)			
COMMUNICATIVE IRISH			
FRENCH			
GERMAN			
SPANISH			
ITALIAN			

Total Number of Days/Sessions	@ Rate	Total Amount Claimed
	€ 48.75	€
	€ 63.88	€
	€ 127.77	€
	TOTAL AMOUNT DUE	€

FORM TO BE COMPLETED INDIVIDUALLY FOR EACH SUPERINTENDENT

Signed: ____(Superintendent) Date:____

Date:__

Declaration I certify the Superintendents has carried out their duties in a satisfactory manner.

I certify I have paid the Revenue Commissioners the appropriate PAYE, PRSI & USC.

I certify I have paid the Revenue Commissioners the employers PRSI.

I now claim a total refund of €_____ (which includes the Employer PRSI @ class J1).

Signed:_ __(Principal)