

Teacher: [REDACTED]
Registration Number: [REDACTED]
Registration Category: Secondary Education

Removal with Consent Order

A Fitness to Teach Convenor has decided to issue you with a Removal Consent Order.

By signing below, I, [REDACTED], registration number [REDACTED], declare that:

1. I have had the opportunity to seek advice from an independent legal representative on the terms and content of this consent order.

2. I admit the below allegation(s) in full.

1. *Between 16 May 2015 and 26 June 2015, the Teacher, whilst employed by Fife Council as a [REDACTED], and in relation to Witness A, a pupil at that time did:*

- a) Follow Witness A on Twitter using his personal account;*
- b) Request Witness A's mobile telephone number; and*
- c) Repeatedly send text messages to Witness A of a flirtatious nature.*

2. *The Teacher's actions at allegation 1 were:*

- a) Indicative of a close personal relationship with Witness A which did breach the boundaries of a teacher/pupil relationship; and*
- b) Indicative of an attempt to form a romantic relationship with Witness A.*

And in light of the above, it is alleged that the Teacher's fitness to teach is impaired and he is unfit to teach, as a result of breaching Parts 1.2, 1.3, 1.4 and 1.6 of the General Teaching Council for Scotland's Code of Professionalism and Conduct 2012.

1. I waive my right to further adjudication proceedings.

2. I agree to the imposition of the below disposal order:

Removal

I understand that my name will be removed from the GTCS Register and that I will be prohibited from applying for restoration to that Register for a period of 2 years from the date of my name being removed from the Register of Teachers.

3. I understand that the content of this Order will be made available to the public unless a Fitness to Teach Panel has decided that all or any part of it should be redacted.

Name

Signature

Date

[REDACTED]

If you do not consent

I do not consent to the above order and understand that the adjudication procedure set out in the Fitness to Teach Rules 2017 will resume as if this process had never been pursued.

Please sign and date.

Name _____

Signature _____

Date _____

Reason(s) for not consenting (optional):

