

**Application for Employment**

Please complete this form for all vacancies at Limerick Youth Service.

Please type: **Incomplete/illegible applications will not be accepted.**

Candidates will be short listed for interview on the basis of information supplied on their applications.

This application form, when completed, should be returned to:

[sineadn@limerickyouthservice.org](mailto:sineadn@limerickyouthservice.org)

**Position applied for**:

**Name in Full**:

**Address:**

**Telephone Home**: **Mobile:**

**Email address**:

**Notice Period**:

Have you previously applied to or been employed by this organisation? Yes No

If yes, please give details.

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**Do you hold a current Full Driving Licence? Y N**

**Do you have access to own transport in order to fulfil the requirements of the role?**

**Y N**

**Employment History:**

Please start with your most recent employment history. Include any period of unemployment. No period should be left unaccounted. (Where citing voluntary experience you must provide evidence of number of days/hours etc. worked over what period of time). If necessary continue on a separate sheet.

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| **Dates** | | **Employers Name & Address** | **Position Held and Brief List of Duties and Responsibilities** | **Reason for Leaving/Salary** |
| **From** | **To** |
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**Education Record**

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| **Second Level** (Most recent education first) | | | | | | | | | | | | | | | |
| **Dates** | | | | | | **School/ College**  **Attended** | | **Examinations Taken** | | | **Year** | | **Results/Grades Obtained** | | |
| **From** | | | **To** | | |
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| **Third Level:** | | | | | | | | | | | | | | | |
| **Dates** | | | | | **School, College or University** | | **Examinations/Course Taken** | | | **Year Degree/**  **Qualification Obtained.** | | | | **Results/Grades Obtained/Other Distinctions** | |
| **From** | | | | **To** |
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| **Professional / Occupational Training/ Courses Attended** (Most recent training first) | | | | | | | | | | | | | | |
| **Dates** | | | | **College, Institute or Employer** | | | | **Name & Type of Training e.g. Full time, part time, distance learning** | | | **Qualifications obtained** | | | **Year of Award** |
| **From** | **To** | | |
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Describe your experience of the following in the course of your work to date:

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| **Working with Young People in a Non-Formal Environment:** (Groupwork, facilitation skills, programme delivery etc.) |
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| **Planning & Organisational Skills**: How do you manage your time effectively to achieve outcomes? Programme Planning, design etc. |
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| **Communication & Interpersonal Skills:** e.g., facilitation skills, networking, etc.Describe your ability to liaise with a range of contacts and build relationships. |
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| **Please comment on any particular programmes/interventions you have developed that were successful** |
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| **Outline your experience in the area of administration in particular:** preparingreports, record keeping, annual plans and computer skills. |
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| **Describe your approach to team working**: |
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| **Any Other Information That May Help in Assessing Your Application:** e.g. any other attributes you may have for this position or any other particulars you wish to include relating to occupation. |
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| **Special Interests/Achievements**: e.g. any certificates/successes outside of work |
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**Please indicate how you meet the requirements for the post.** You are invited give any additional information which you wish to have taken into account in support of your application, and to list hobbies, spare time activities, interests, membership of voluntary organisations etc.

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**Work References:** (Please give names and addresses of two persons, other than persons related to you, who can give a reference for previous employment.

(a) Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (b) Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tel No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Tel No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Closing date for receipt of applications** **is Friday 21st August by 5pm**

Applications received after this date will only be accepted on the basis of a Certificate of Posting showing that the application was posted in time before the closing date.

**Data Protection Clause:**

All personal information provided on this application form will be stored securely by the organisation and will be used for the purposes of the recruitment process. Application forms will be retained for a minimum of 12 months in the case of unsuccessful applicants and in the case of a successful candidate for the duration of their employment and for a minimum of two years thereafter. This information will not be disclosed to any third party without your consent except where necessary to comply with statutory requirements. Internally your information will be kept confidential and only made available as necessary. You may at any time make a request for access to the personal information held about you. Should you wish to make any changes in relation to the information stored about you, please contact the HR Department.

**Declaration:**

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| I hereby certify that all statements given by me on this application are true and correct without omission and that any mis-statements given may disqualify my application or in the event of my obtaining employment result in disciplinary action up to and including dismissal. I also fully recognise that canvassing will disqualify my application. |

Are there any current/ previous personal, employment or background reasons that may be recognised now or at a later stage as deeming you unsuitable to work with children and/or young people? If yes please state your reason(s) below.

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**Signed:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_



**IS AN EQUAL OPPORTUNITIES EMPLOYER**