

APPLICATION FOR EMPLOYMENT

PRIVATE & CONFIDENTIAL		
Position applied for: _____	Date: ____ / ____ /20 ____	
Title: _____	Forename(s): _____	Surname: _____
Mobile Number: _____		
Email Address: _____		

Are there any restrictions on you taking up employment in the State e.g. do you require a work visa?	
Yes <input type="checkbox"/>	No <input type="checkbox"/>
If Yes , please provide details:	

EDUCATION	
Schools/Colleges/University	Qualifications Gained

EMPLOYMENT HISTORY (please complete in full and use a separate sheet if necessary)	
Dates	Name & Address: _____
_____ / _____ / _____	_____
to	Job Title: _____
_____ / _____ / _____	Reason for Leaving: _____



EMPLOYMENT HISTORY (please complete in full and use a separate sheet if necessary)

Dates _____

Name & Address: _____

_____ / ____ / _____

to

_____ / ____ / _____

Job Title: _____

Reason for Leaving: _____

EMPLOYMENT HISTORY (please complete in full and use a separate sheet if necessary)

Dates _____

Name & Address: _____

_____ / ____ / _____

to

_____ / ____ / _____

Job Title: _____

Reason for Leaving: _____

Current membership of professional bodies (please note any professional bodies you are a member of or registered with):

HEALTH DETAILS

Please list any diseases, disabilities, disorders, allergies, muscular or musculo skeletal injuries from which you have suffered or do suffer.

Please detail any form of medicine, drugs or treatment you are currently and/or regularly receiving.

Please list all absences from work in the past 12 months and give the reasons for such absence.



Other Employment (please note any other employment that you would continue with if you were successful in obtaining this position).

REFERENCES 1
Please provide the names & contact details of at least 2 persons from whom we can obtain work references.

Name: _____ Position: _____
Company: _____ Contact No: _____
Email address: _____
May we approach after interview? Yes No

REFERENCES 2

Name: _____ Position: _____
Company: _____ Contact No: _____
Email address: _____
May we approach after interview? Yes No

REFERENCES 3

Name: _____ Position: _____
Company: _____ Contact No: _____
Email address: _____
May we approach after interview? Yes No



GENERAL COMMENTS

Please detail here your reasons for this application, your main achievements to date and the strengths you would bring to this post.

SPECIAL REQUIREMENTS

Because this position involves the care of children employment is dependent on the following:

1. Your written consent to obtaining a Garda Vetting Verification.
2. Such disclosure being acceptable to us.
3. International Police Clearance/Vetting received & such disclosures being acceptable to us.
4. Valid working visa/visa received.
5. Proof of identity e.g. passport, drivers license (in date)
6. Proof of address e.g. utility bill, letter from Revenue, letter from Government body dated within the past 3 months.
7. Two satisfactory written references.
8. Certificate(s) of qualification(s) being supplied to us. Translated into English & DCYA certificate if applicable.

DECLARATION (please read this carefully before signing this application)

1. I confirm that the above information is complete and correct and that any untrue or misleading information will give my employer the right to terminate any employment contract offered.
2. I agree that the organisation reserves the right to require me to undergo a medical examination. (Should we require further information and wish to contact your doctor with a view to obtaining a medical report, the law requires us to inform you of our intention and obtain your permission prior to contacting your doctor).

Signed: _____ **Date:** ____/____/____