**Pavee Point Traveller and Roma Centre Application Form**

TITLE OF ROLE / REFERENCE NUMBER:

**PERSONAL DETAILS (BLOCK CAPITALS PLEASE)**

|  |  |
| --- | --- |
| Surname:  **NAME:** | |
| Contact Address: | Telephone Number: |
| E-mail address: |

To be considered for interview, when correctly completed, this form **must not** contain any gaps in your educational/employment history from date of school completion to the present date.

**PRESENT EMPLOYMENT**

|  |  |  |
| --- | --- | --- |
| Name, Address and Telephone number of Employer | Title of Role | Main responsibilities: |
|  | From: |
| To: |
| Current Salary: |
|  | Reason for leaving |  |

**PREVIOUS EMPLOYMENT**

|  |  |  |
| --- | --- | --- |
| Name, Address and Telephone number of Employer | Title of Role | Main responsibilities: |
|  | From: |
| To: |
|  | Reason for leaving |  |
| Name, Address and Telephone number of Employer | Title of Role: | Main responsibilities: |
|  | From: |
| To: |
| Name, Address and Telephone number of Employer | Title of Role | Main responsibilities: |
|  | From: |
| To: |
| Name, Address and Telephone number of Employer | Title of Role: | Main responsibilities: |
|  | From: |
| To: |

To include information about any additional employment/work experience, please complete below or attach additional information to your application. Please explain any gaps that may exist in your career/educational history:

**FURTHER CAREER HISTORY/EXPLANATION OF GAPS**

|  |
| --- |
|  |
|  |

**EDUCATION**

|  |  |  |  |
| --- | --- | --- | --- |
| Schools | From | To | Examinations and results |
|  |  |  |  |
| College / University | From | To | Courses and results |
|  |  |  |  |
| Further education and formal training | From | To | Courses and results |
|  |  |  |  |
| Professional membership and qualifications: | | | |

**INTERESTS AND ACHIEVEMENTS**

Please provide details of any interests and/or achievements which you have:

**REFERENCES**

|  |  |
| --- | --- |
| Names and addresses of three referees: | |
| Name:  Organisation:  Relationship to you:  Address:  Tel No:  E-mail:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name:  Organisation:  Relationship to you:  Address:  Tel No:  E-mail: | Name:  Organisation:  Relationship to you:  Address:  Tel No:  E-mail:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Please indicate if we may contact them prior to interview: YES/NO (please circle) | |
|  | |

**ADDITIONAL INFORMATION**

|  |  |
| --- | --- |
| Where did you see this vacancy advertised? (please circle/highlight) | Pavee Point Traveller and Roma Centre Website  Facebook  Twitter  LinkedIn  ActiveLink  Other (please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Do you have a valid, clean driving license? | Yes / No (please circle) |
| If yes, what type of license: | Full / Provisional (please circle) |
| Do you require a visa to work in Ireland? | Yes / No (please circle) |
| If yes, please provide further information: | |
| Have you applied for a position with Pavee Point Traveller and Roma Centre in the past? Yes / No (please circle)  If Yes, position applied for and date of application: | |

|  |
| --- |
| Are you available to work full-time \_\_\_\_\_\_\_ part-time \_\_\_\_\_\_\_\_ (Y/N)?  Are you looking to work remotely if so what percentage?  How many hours can you work weekly (approx.)? \_\_\_\_\_\_\_\_\_\_\_\_\_\_  Days/hours available to work (tick all that apply):  No Pref \_\_\_\_\_\_\_\_\_\_ Thur \_\_\_\_\_\_\_\_\_  Mon \_\_\_\_\_\_\_\_\_\_ Fri \_\_\_\_\_\_\_\_\_  Tue \_\_\_\_\_\_\_\_\_\_  Wed \_\_\_\_\_\_\_\_\_\_ |
|  |

|  |
| --- |
| How much notice do you have to give your employer? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |
|  |

**DECLARATION**

|  |
| --- |
| I have completed this form fully and honestly, and I hereby declare that the above statements are true to the best of my knowledge. I understand that any deliberate misstatement may render me liable to dismissal, if engaged. I declare that the information given is true and correct. I give my consent to my referees being contacted as indicated.  Name ……………………………………… Signed ……………………………………  Date ……………………..…… |

**Health:**

If you would like us to know something about your health, please write a short covering note and attach it to this form. Under our equal opportunity policy neither disability nor a history of poor health will impede you from being seriously considered for the post. Pavee Point requires successful applicants to undertake a medical prior to commencement of employment.

**Everyone applying to work at Pavee Point, who will come in to contact with children, is required to disclose any criminal convictions under the current childcare legislation. Garda clearance will be taken up prior to appointment*. Persons with violence or child abuse convictions may NOT apply.***