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|  | **Bradóg Youth Service CLG**    An Equal Opportunities Employer  As our work involves contact with young people, candidates under consideration for employment in Bradóg will be subject to Garda vetting. Full details of applicants for jobs in Bradóg are submitted to the Garda Central Vetting Unit to check that there are no unsuitable applicants. |  |
| **POSITION(S): Detached Youth Worker** | | |
| PLEASE RETURN COMPLETED APPLICATION FORM NO LATER THAN FRIDAY 15th August 2025 at 5.00pm to:  **Darren O’Connor (darren.oconnor@bradog.com)** | | | |

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| PERSONAL DETAILS |

1. **PERSONAL DETAILS (In Block Letters and Black Ink)**

| Title: |  | First Name(s): |  | | | | Surname: | |  | | | |
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| Address – For Correspondence Purposes | | | | |  | | | | | | | |
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|  | | | | |  | | | | | | | |
| Home telephone number | | | | |  | | | | | |  | |
| Work telephone number | | | | |  | | | | | |  | |
| Mobile telephone number | | | | |  | | | | | |  | |
| Email address | | | | |  | | | | | |  | |
| Are there any restrictions on your right to work in this country? | | | | | |  | | | | | | |
| If yes, please give details: | | | |  | | | | | | | | |
| Do you hold a driving licence: | | | |  | Provisional licence: | | |  | | Full Licence: | |  |
| Details of any endorsement(s): | | | |  | | | | | | | | |
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| EDUCATION |

**(2) SECOND LEVEL EDUCATION**

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| --- | --- | --- | --- | --- | --- | --- | --- |
| School Attended  (Name and Address) | Entered | Left | Leaving Certificate (or equivalent)  Subjects Taken | | | | |
|  |  |  | Subject  (Higher) | Result | Subject  (Lower) | Result | |
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| **How many times did you sit this examination** | |  |  | | | |

**(3) THIRD LEVEL EDUCATION**

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| --- | --- | --- | --- | --- | --- | --- |
| Qualifications Title of Award (Cert/Diploma/Degree/Professional Qualification or Higher) | Full/  Part-time | Duration | Grade Achieved (e.g. First Class Honours etc) | University/  College Attended | Awarding Body\* | Year of Award |
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**\* Use appropriate initials e.g. NCEA, NUI etc**

**(4) COMPUTER COMPETENCE**

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| **Please tick as appropriate to indicate proficiency in the following:** | | | | |
| Software Package | No Knowledge | Limited Familiarity | Extensive Use in Work Situation | Qualification  (if held) |
| Microsoft Word |  |  |  |  |
| Microsoft Excel |  |  |  |  |
| Microsoft Access |  |  |  |  |
| Microsoft PowerPoint |  |  |  |  |
| Other (Specify)  Salesforce  Logbook |  |  |  |  |

**(5) ADDITIONAL RELEVANT TRAINING TO THIS POST**

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| --- | --- | --- | --- | --- | --- | --- |
| Title of Course Attended: | Name of College/Training Centre attended: | Full/  Part-time: | Content/Details  of Course: | Dates attended: | Duration: | Qualification attained (if relevant): |
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| EXPERIENCE |

**(6) PRESENT OR MOST RECENT EMPLOYMENT**

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| Name of Employer: | |  | | | | Job Title | |  | |
| From: |  | | To: |  | | Full/Part Time: | | |  |
| Month/Year Month/Year | | | | | | |
| Nature of Work/Main Responsibilities: | | | |  | | | | | |
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| Title of Other Positions Held by you in the Organisation: | | | | |  | | | | |

**(7) PREVIOUS APPOINTMENTS (Please list all previous appointments)**

Start with the appointments which preceded that described above and work backwards through your career. Please include previous positions with your present employer.

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| Period in Months | Full/  Part-  time | Inclusive Dates From To | | Employer’s Name, Business and Location | Brief Job Description and Main Responsibilities | Reason for Leaving |
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(8) Please say why you are applying for this position and what qualities you consider you will bring to this position. Indicate how you have pursued your interest in this area of work.

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1. **Give examples of work, academic and non-academic (activities, clubs, societies, voluntary work) where you have been a member of a team. Describe in more detail a recent activity where you were particularly pleased with your achievements.**

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**(10) Do you have any experience of detached youth work? Please explain.**

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**(11) Any further information you wish to supply in support of your application?**

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**(12) Please give name, address, telephone number and email address of two referees:**

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| **NAME** |  |  | **NAME** |  |
| **ADDRESS** |  |  | **ADDRESS** |  |
|  |  |  |  |  |
| **TEL. NO.** |  |  | **TEL. NO.** |  |
| **EMAIL:** |  |  | **EMAIL:** |  |

**(13) Please note**

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| --- | --- | --- | --- |
| Before you return the form, please ensure that you have completed all sections. The onus is on candidates to establish eligibility on this application form.  **Please do not forward any certificates, curriculum vitae or references with this form.** | | | |
| Signature of Applicant: |  | Date: |  |