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| **FOR OFFICE USE ONLY** | |
| Applicant Number: |  |
| Shortlisted Y/N |  |
| Competition ID number: |  |

**Dún Laoghaire-Rathdown County Council**

**Application for the post of:**

**Please ensure you complete all parts of the application form in full in order for eligibility to be determined, incomplete application forms will not be accepted**

**Notes:** Please return this application form before the closing date of **Thursday 1st August 2024 – 12 noon.**

1. Applications for this competition **must be typed** and will **only** be accepted by email to [**careers@dlrcoco.ie**](mailto:careers@dlrcoco.ie)in the following format only: **pdf; an automated reply will be delivered to the applicant by return.**
2. **Do not** attach any C.V.’s or related documents with this form.
3. Dún Laoghaire-Rathdown County Council will not reimburse any travel expenses necessary to attend the interview.
4. Before you return the form, please ensure that you have completed all sections and that you have read the declaration at the end of the form and have printed your name as consent to same.
5. Please note that you may be asked to provide evidence of the National Framework of Qualifications level of your qualifications and copy of certificates verifying qualifications. The onus is on the candidates to establish eligibility in this application form.
6. Canvassing by or on behalf of the applicant will automatically disqualify.
7. Please note that applicants may be shortlisted on the basis of the information supplied on this application form.
8. When completing this application form, please continue on additional pages if necessary, setting out the information in the same manner as indicated.
9. Queries may be made to the Human Resources Section, Dún Laoghaire-Rathdown County Council, County Hall, Marine Road, Dún Laoghaire, Co. Dublin or by telephone on 01-2054854 or email [hr@dlrcoco.ie](mailto:hr@dlrcoco.ie).

**Dun Laoghaire-Rathdown County council is committed to a policy of equal opportunity and encourages applications under all nine grounds of the employment equality act**

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| **SECTION A – PERSONAL DETAILS** | |
| **Surname:** | **Forename(s):** | |
| **Address:** | **Home Telephone:** | |
| **Work Telephone:** | |
| **Mobile Tel Number:** | |
| **Eircode:** | **Email address:** | |
| **DLRCC Employee No:** |  | |
| **SECTION B – EDUCATION, QUALIFICATIONS and TRAINING** | | |

**GENERAL EDUCATION:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Dates** | | **Name of Secondary School (s)** | **Examinations Taken** | **Subject** | **Level Honour/Pass** | **Results** |
| **From** | **To** |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

**ACADEMIC, PROFESSIONAL OR TECHNICAL QUALIFICATIONS:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Dates** | | **University, College or Examining Authority** | **Title of Qualification Obtained** | **Level in the National Frameworks of Qualifications** | **Year Qualification Obtained** | **Final Year Examination Subjects** |
| **From** | **To** |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

**RELEVANT TRAINING /COURSES (OPTIONAL):**

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| **SECTION C – EMPLOYMENT RECORD** |

Please give below, in date order **(starting with your current employer)** full details of all employment between the date of leaving school or college and the present dates. Please do not leave any period between these dates unaccounted for. If necessary, continue on a separate sheet, setting out the information in the same manner as below.

|  |  |  |  |
| --- | --- | --- | --- |
| **Employer:** |  | **Dates:** | |
| **From YY/MM** | **To YY/MM** |
| **Address:** |  |  |  |
| **Nature of Business:** |  | | |
| **Position Held:** |  | | |
| **Temporary or Permanent:** |  | | |
| **Description of Main Duties and Responsibilities:** | | | |
| **Reason for Leaving:** | | | |
|  | | | |
| **Employer:** |  | **Dates:** | |
| **From YY/MM** | **To YY/MM** |
| **Address:** |  |  |  |
| **Nature of Business:** |  | | |
| **Position Held:** |  | | |
| **Temporary or Permanent:** |  | | |
| **Description of Main Duties and Responsibilities:** | | | |
| **Reason for Leaving:** | | | |

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| **Please indicate the reason(s) for seeking the position applied for:** |

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| **SECTION D – ADDITIONAL INFORMATION** |

**REFEREES:**

Give names and addresses of two responsible persons, to whom you are well known but not related (if you are or have been in employment, referees should be existing or former employers)

|  |  |
| --- | --- |
| **Name:** |  |
| **Position Held:** |  |
| **Address:** |  |
| **Email:** |  |
| **Contact Tel No.:** |  |
| **Details of Employer:** |  |
|  | |
| **Name:** |  |
| **Position Held:** |  |
| **Address:** |  |
| **Email:** |  |
| **Contact Tel No.:** |  |
| **Details of Employer:** |  |

Have you any objections to Dún Laoghaire- Rathdown County Council contacting your present and/or previous employers?        **YES/NO**

Are you in receipt of a superannuation allowance in respect of previous employment in the Public Service? **YES/NO**

If yes, please give details of pension and date granted: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever accepted voluntary redundancy/ early retirement from a local authority or any other Public Service organisation by which you were employed? **YES/NO**

If yes, please give details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please specify the class/s of your current, full driving licence: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you hold a current Safe Pass? **YES/NO**

It is a requirement of Dún Laoghaire – Rathdown County Council that you take up duty within one month following an offer of employment.

Do you require any special facilities/arrangements for the interview? **YES/NO**

If **yes** please outline the type of support you require below: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**I HEREBY DECLARE all the foregoing particulars to be true and give my permission for any enquiries to be made to establish such matters as age, qualifications, experience, character and for the release by other people, agencies, police authorities or organizations of such information as may be necessary to Dún Laoghaire- Rathdown County Council for that purpose. This may include enquiries from past/ present employers.**

**THE SUBMISSION OF THIS APPLICATION IS TAKEN AS CONSENT TO THE FOREGOING.**

**AN AUTOMATED REPLY WILL BE DELIVERED TO THE APPLICANT BY RETURN.**

**PRINT NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Employment opportunities are accessible to all potentially qualified applicants including people with disabilities. If you have a disability and require any reasonable adjustments, or your first language is not English and you require any assistance with any aspect of our recruitment and selection process please call 01 2054854.**