



APPLICATION FORM

Please complete all sections accurately, giving as many details as possible of your skills and experience relating to this job application. Shortlisting will be based on the information gathered from the form, read in conjunction with the person specification.

Please ensure the completed form is printed, signed, dated and returned by the closing date.

Please either type directly in this form or complete in black ink and BLOCK CAPITALS.

POSITION APPLIED FOR

Job Title: Alcohol Related Brain Injury – Resource Officer.

Where did you see this post advertised?

1.

APPLICANTS DETAILS

Title	Surname	First Name

Home address

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Telephone Numbers (Please include full STD Code)

Home:

Mobile

Email address:

PPS Number:

Do you hold a current driving licence?	YES/NO
Please give details of any endorsements	
Do you have access to a car and access to it for work purposes?	YES/NO
Are you registered as having a disability?	YES/NO
Do you have access requirements that need to be accommodated?	YES/NO
Are there any restrictions regarding your employment? e.g. do you require a work permit	YES/NO If you answered Yes please supply details on a separate sheet of paper

Do you consent to vetting checks if necessary?

YES/NO

How much notice do you need to give your current

employer?	
Number of sick days you have had within the last year with current employer?	

2. EDUCATION AND QUALIFICATIONS

Second Level Education	Name & Address of establishment:		
Qualification	Subject	Grade	Date Obtained

Third Level Education	Name & Address of establishment:		
Awarding Body	Course	Grade Achieved	Date Awarded

Membership of Professional Body/Institute		
Awarding Body	Level of Membership	Date Awarded

Additional Training/Educational Qualifications		
Course Name	Level Achieved	Date

3. EMPLOYMENT HISTORY		

Please start with your most recent/current employment. Briefly describe the main duties and responsibilities of your post.

Name & Address of Employer	Start & End Date	Job Title and Duties/Responsibilities	Salary & Reason for leaving

Please list all previous employment including periods of unemployment, unpaid placements and voluntary work (use additional pages if necessary)

Name & Address of Employer	Start & End Date	Job Title and Duties/Responsibilities	Paid or voluntary	Reason for leaving

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Please continue on to another page if necessary

4.

SKILLS & ABILITIES

Please refer to the Job Description and Person Specification when completing this section.

4a. Please specify using recent examples how you meet the essential criteria for this position

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4b. Please state your reasons for applying for this position and the qualities you will bring to the position.

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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. The Alcohol Forum may require successful applicants to undertake a medical prior to commencement of employment.

Criminal Record

Everyone applying to work at the Alcohol Forum, who may come in contact with children, is required to disclose any criminal convictions under the current childcare legislation. Garda / Police clearance will be taken up prior to appointment.

Child Protection:

Have you ever been convicted of a criminal offence other than a spent conviction? **YES / NO**

Has any action ever been taken against you in regard to a child/children? **YES / NO**

Have you ever been charged with a sexual/physical abuse offence? **YES / NO**

If the answer is yes to any of the above, a detailed explanation must be enclosed.

Persons with violence or child abuse convictions may NOT apply.

6.**REFERENCES**

Please give name, address and position/occupation of two referees. One must be your present or most recent employer. Testimonials or references from friends and relatives are not acceptable.

1) Name:	
Position:	
Organisation:	
Address:	
Telephone:	Email:
Can we contact this person prior to interview? YES / NO	

2) Name:	
Position:	
Organisation:	
Address:	
Telephone:	Email:
Can we contact this person prior to interview? YES / NO	

7.**DECLARATION AND FURTHER INFORMATION**

- Canvassing will result in immediate disqualification.
- The employer reserves the right only to interview on the basis of information supplied on the application form by candidates who meet the criteria for the post.
- The Alcohol Forum is an equal opportunities employer, committed to ensuring that the talents and resources of all our employees are utilised to the full. We will not discriminate unfairly against any individual in matters of recruitment or selection for any position, promotion development or training irrespective of; gender, marital or family status, race, ethnicity or colour, disability, religious or political opinion, sexual orientation, nationality or age.
- It must be understood that should the position become redundant at any time during the period of the contract or if the funding for the post is discontinued or the post holder fails to perform satisfactorily, their contract may be terminated
- Application is by way of application form only – CVs will not be accepted

Additional Information

Please insert any additional information you may feel relevant to your application.

I give the employer the right to investigate all references and to secure additional information about me, if job related. I hereby release from liability the employer and its representatives for seeking such information and all other person, corporations or organisations for furnishing such information.

I have read and understood the requirements and particulars of the appointment which have been supplied to me. I further understand that the job offer may be subject to the satisfactory outcome of reference and/or a pre-employment health assessment and I consent to my doctor being approached for further information, including medical reports if the employer considers it necessary.

I further understand that a Vetting check must be carried out before an offer of employment can be confirmed. This has been explained to me and I am aware that spent convictions may be disclosed. I declare that the information I have given is accurate and I consent to the check being made.

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Signed

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Date

Thank you for your application and the interest that you have shown in the Alcohol Forum Ireland . If you have any queries relating to this application, please contact us on 0876790241.

Please ensure you have completed all relevant sections and that any additional pages have been attached.

Return completed Application Form to the address below by **Friday 13th January 2023 no later than 5pm.**
or via email to info@alcoholforum.org

Alcohol Forum Ireland
Enterprise Fund Business Centre,
Ballyraine,
Letterkenny,
Co. Donegal.
Tel: 074 91 25598: E-Mail info@alcoholforum.org