Application for Employment [Confidential] Barnardos

NOTE: Complete this form using Adobe Reader. Before you start filling in the form, please make sure you have SAVED THE FORM TO YOUR OWN COMPUTER (using Save AS from the 'File' menu). Attach YOUR SAVED VERSION in an email to the contact person for the role. If you do not save a copy to your computer you may lose all the information in the document.

| POSITION APPLIED FOR AND LOCATION | | | | | | | |
|--|--|-------------------|--|----------------------------------|--|--|--|
| Position: | | | Location: | | | | |
| 1. PERSONAL II | NFORMATION | | | | | | |
| (a) Surname (Second or Family name) | | | (b) Forenames (First Name |) | | | |
| | | | | | | | |
| (c) Home Address | \$ | | Home Telephone No: | | | | |
| | | | Mobile: | | | | |
| | | | E-mail Address: | | | | |
| | | | Work Telephone No: May we, with discretion, telephone you at work? | Yes No | | | |
| | mply with the Employments ed in the Republic of Ireland | | 003 and 2006, please give det | tails of the basis which permits | | | |
| If successful documentation will be requested to confirm above. All successful candidates will be asked to supply proof of identity and other appropriate documentation. | | | | | | | |
| | n of qualifications. | der trie followir | ig rieduirigs. Trie successiui | candidate will be required to | | | |
| | Name of College | From/To: | Full time or Part time | Qualification: Diploma or Degree | | | |
| Second Level: | | | | | | | |
| Third Level: | | | | | | | |
| | | | | | | | |
| Post Graduate: | | | | | | | |
| Other: | | | | | | | |

| 3. EMPLOYMENT RECORD: Please give details of your complete working history beginning with your present or last employment | | | | | | | |
|---|-----------------------------|---|-------------------------------------|--|--------------|--------------------|--|
| Dates employed month and year m | (please specify nm/yyyy) | Employer's name, address and nature of business | Job Title and description of duties | Full or Part time, including number of hours | Final Salary | Reason for leaving | |
| From: | To: | | | | | | |
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| 3 (contd.) EMPLOYMENT RECORD: Please give details of your complete working history beginning with your present or last employment | | | | | | |
|---|-------------------------------|---|-------------------------------------|--|--------------|--------------------|
| Dates employed month and year | d (please specify mm/yyyy) | Employer's name, address and nature of business | Job Title and description of duties | Full or Part time, including number of hours | Final Salary | Reason for leaving |
| From: | То: | | | | | |
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| 4. DISCLOSURE OF CONVICTIONS | | | | | | |
|--|--|------|--------------|--|--|--|
| (a) Has any action been taken against you or have you been subject of an investigation in regard to a child/ children under the age of 18? | | | No | | | |
| (b) Are you at present the subject of criminal charges or investig | gation? | Yes | No | | | |
| (c) Is there anything in your background that would render you work with children or in a child welfare organisation? | unsuitable to | Yes | No | | | |
| IF THE ANSWER IS 'YES' TO ANY OF THE A | BOVE QUESTIONS, PLEASE GIVE DETA | ILS. | | | | |
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| The successful candidate may be required to complete the E-vetti | | | f applicable | | | |
| as part of our Recruitment process. A criminal record will not nece | essarily bar you from obtaining this position. | | | | | |
| 5. PLEASE STATE YOUR REASON FOR APPLYING I | FOR THIS POSITION | | | | | |
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| 6. SOURCE OF APPLICATION | 7. IF APPOINTED | | | | | |
| How did you hear of this vacancy? | When could you commence employment | t? | | | | |
| Barnardos website | | | | | | |
| Other website | | | | | | |
| Newspaper Word of mouth | | | | | | |
| Other | | | | | | |
| Details of other | | | | | | |
| 8. INTERESTS AND VOLUNTARY ACTIVITIES | | | | | | |
| Please give brief details of pastimes, hobbies, sports, and any voluntary work undertaken. | | | | | | |
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| 9. KLI LKLNOLS | | | | | |
|----------------------|---------------------|----------------------|---------------------------|---------------------------|---------------------|
| Name, address and te | elephone number, of | your present employe | r, or if unemployed, thos | se of your last employer. | If you have been in |

your present employment for less than 2 years, please include your previous employer as an additional referee below. Do you give us permission to write to your present/last employer without writing to you again? Yes No Please give the names and addresses of two people whom we may contact without further permission for a confidential assessment of your suitability for this job, preferably two previous employers. If this is a first job application, some other appropriate person unrelated to you, e.g. your principal or college tutor. You should not give your own doctor as a referee. 1. 2. Name Name Address Address Telephone Number Telephone Number Occupation Occupation How long acquainted How long acquainted with you? with you? In what connection? In what connection? You are invited to include on a separate sheet any relevant supplementary information in support of your application. 10. CONDITIONS OF EMPLOYMENT All offers of employment are conditional on satisfactory references, Medical Approval & Garda Vetting. 11. DECLARATION I hereby declare that the above statements are true to the best of my knowledge. I understand that any deliberate mis-statement may render me liable to dismissal, if employed. I further declare there is no known reason or event that would render me unsuitable for the post or to work in a child welfare organisation. Print Name: Date: Signature:* Date: *Shortlisted candidates are required to sign their application form at interview if they have not already done so.