

**Eastern and Midland Regional Assembly
Tionól Reigiúnach Oirthir agus Lár-Tíre**

Corporate/HR – EU Affairs

APPLICATION FORM

3rd Floor
Ballymun Civic Centre
Main street
Ballymun
Dublin 9

TEL + 353 1 8074482
www.emra.ie info@emra.ie

Please complete this form in **BLOCK CAPITAL LETTERS**:

First Name:	<input type="text"/>
Surname:	<input type="text"/>
Address:	<input type="text"/>
	<input type="text"/>
	<input type="text"/>

If you change your address at any stage during the recruitment process, please inform by e-mail above of such change.

Telephone:	Home	<input type="text"/>
	Work	<input type="text"/>
	Mobile	<input type="text"/>
	Email:	<input type="text"/>

Please print e-mail address carefully, as we will endeavour to correspond with you by e-mail during the recruitment process

Requirements:

Please detail any special needs or requirements you may have, and how these can be facilitated during the recruitment process (e.g Sign Language)?

Qualification Questions:

Do you have an Honours Bachelor Degree or higher degree in relevant discipline?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Do you have the required five years minimum experience for this post?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Do you have full rights as a Citizen of a Member State of the EU?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

PARTICULARS OF EDUCATION

General Education

Name of School attended	From	To	Certificates/Distinctions obtained

Further Education

Name of Course & College	From	To	Result/Qualification achieved	Grade obtained EG 2.1, Pass, Credit, etc.

EMPLOYMENT RECORD

Work Experience – Commencing with the most recent employment. *Please detail duration of time (i.e. years/months) in each position/job.*

Name of Employer:			
Address of Employer:			
From:		To:	
Grade/Title:			
Job Description:			

Name of Employer:			
Address of Employer:			
From:		To:	
Grade/Title:			
Job Description:			
Name of Employer:			
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Address of Employer:			
From:		To:	
Grade/Title:			
Job Description:			

Please supply additional employment record if required.

Questions

In each of the competency areas below briefly detail a max of 2 examples which you feel best demonstrate your capacity in the competency area described. You may use the same examples across more than one competency area should you so wish. Your examples should show clearly how you have demonstrated the particular competency. You should be mindful that the scale and scope of the examples given demonstrate the competency in question and are appropriate to a post at management level.

Please refer to the “Key Competencies” section in the Job Description booklet for further information on the competencies for this role. You should also have regard to the “Essential Skills and Experience” section of the booklet in choosing your examples.

Management & Change

Delivering Results

Performance through People

Personal Effectiveness

REFEREES

Referees: Please name two responsible persons, to whom you are well known but not related, one of the Referees should be an existing or former Employer:

Name:		Name:	
Address:		Address:	
Title/Position:		Title/Position:	
Email:		Email:	
Contact Number:		Contact Number:	

Languages:

Knowledge of Irish: Good Fair Not Good

(Please note "Good" means being capable of performing the duties of office through the medium of the language).

Any Other Relevant Information:

DECLARATION

PLEASE READ AND SIGN THE DECLARATION BELOW

I, hereby declare, that all particulars in this application are true and correct, to the best of my knowledge and belief. I give my permission for enquiries to be made to establish such matters as age, qualifications, experience and character and for the release by other people or organisations of such information as may be necessary to the Regional Assembly for that purpose. This may include enquiries from past/present employers and the submission of this application is taken as consent to this. I am aware that any canvassing, by me, or on my behalf, will disqualify me from the position I am seeking and that any employment offered to me is dependent upon the information given herein being correct. I am aware that false or misleading information or deliberate omissions may result in termination of any employment offered.

Signature of Applicant: _____ **Date:** _____

PLEASE CHECK THE FOLLOWING BEFORE SUBMITTING YOUR APPLICATION:

- Completed forms should be sent by email, to recruitment@emra.ie Applications will only be processed on receipt of completed application forms. The closing date is: **5pm on Monday, 2nd July 2018.**
- Only applications made on the official application form will be accepted. Application forms received after the closing date WILL NOT be accepted.
- Ensure that you have answered ALL questions fully and correctly.
- The Assembly **reserves** its right to shortlist candidates in the manner it deems most appropriate which may include shortlisting on the basis of essential requirements. Candidates may be shortlisted based on the information supplied on the application forms.
- The personal data supplied by you on this application form will be stored on computer and will be used only for the purposes registered under the Data Protection Acts, 1988 and 2003

**Eastern & Midlands Regional Assembly is an equal opportunity Employer
Canvassing will automatically disqualify**