

**EXPLORE INISHOWEN CLG**

**Important**

You can either print out this application form and complete with black pen, or use Adobe Acrobat to complete this form electronically.

Instructions on completing application form electronically:

1. **Save the document to your computer**
2. **Fill in all relevant text areas**
3. **Save your application as you complete each section**
4. **Once completed, attach the PDF to an email and return to** **manager@govisitinishowen.com**

Note: Apple MAC users, do not use Preview to complete this form, thank you

“This project is supported by the Department of Rural and Community Development and Pobal through the Community Services Programme”

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| --- | --- |
|  | **EXPLORE INISHOWEN CLG**  |

**Administration/Finance Officer**

This Application Form, when completed, should be returned via email:

#### to manager@govisitinishowen.com

Closing Date: **12.00 noon on Friday, July 8th 2022**

Surname (Block Capitals):- \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

First Name (Block Capitals):- \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address (for correspondence):-\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Permanent Address (if different):- \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone No:- Home: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Work: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mobile: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail Address: \_\_\_\_\_\_\_\_\_\_\_\_\_

Do you require any special facilities/arrangements if called for interview: YES/NO .

If yes, please specify:

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

# PARTICULARS OF EDUCATION

1. **EDUCATION/QUALIFICATIONS OBTAINED**

|  |  |  |  |
| --- | --- | --- | --- |
| **School, College, University attended** | Period**From To****(Please indicate if Full-Time or Part-Time)** | **Examinations taken****(with dates)** | **Results (Grade Obtained 1, 2.1 …Pass)** |
|  |  |  |  |

# RECORD OF EMPLOYMENT EXPERIENCE TO DATE

|  |  |  |  |
| --- | --- | --- | --- |
| **Employer** | Period of Employment To From and Reason for Leaving | **Position Held** | **Duties/Responsibilities** |
|  |  |  |  |

N.B. PLEASE COMPLETE PAGE NUMBERS 3 & 4 IN FULL.

DO NOT SUBMIT A CURRICULUM VITAE

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Details of Relevant Experience

|  |
| --- |
| In relation to the employment record you have supplied please give details of **your experience in the following areas.** You should ensure that the example(s) you use is from a recent period in your employment which you feel most equips you for this position.  |

1. **Outline your working knowledge of the tourism sector locally, regionally and nationally. (**Refer to other Agencies and the range of initiatives available and also refer to any barriers faced)

**(ii) Describe briefly your experience of working with financial accounts, payroll & reporting processes associated with this position**

**(iii) Describe briefly your experience giving examples of developing budgets and forecasting annual accounting documents to record traded income.**

**(iv). Outline your experience of working in a team.**

**v) Give examples of your experience of working within an office/community organization practically regarding administration and reporting duties.**

(**vi) Level of IT Skills**:

Please tick below to indicate competency with the following

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | No Knowledge | Basic Knowledge | Good Knowledge | Extensively Used |
| Databases (e.g. MS Access) |  |  |  |  |
| Email |  |  |  |  |
| File Management |  |  |  |  |
| Presentations ( e.g. powerpoint) |  |  |  |  |
| Social Media |  |  |  |  |
| Spreadsheets (e.g. MS Excel) |  |  |  |  |
| Website Management |  |  |  |  |
| Word Processing |  |  |  |  |

Do you hold a full driving licence? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have access to a car? *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

Number of days sickness absence in the last 2 years/state number of occasions in the last 2 years: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please indicate if you are in receipt of a social welfare payment as referenced in job advert? Y/N …………

Period of Notice – How soon after an offer of employment could you take up employment?

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- | --- |
|  |  |

**PLEASE PROVIDE THE NAMES OF TWO RESPONSIBLE PERSONS AS REFEREES, TO WHOM YOU ARE WELL KNOWN BUT NOT RELATED.**

**(IF YOU ARE IN EMPLOYMENT, ONE OF THE REFEREES SHOULD BE AN EXISTING EMPLOYER)**

NAME:- \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NAME:- \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS:- \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ADDRESS:- \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Before signing this Form please ensure that you have replied fully to all questions.

I, the undersigned, HEREBY DECLARE, all the foregoing particulars to be true.

Signature of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PLEASE DO NOT SUBMIT YOUR CURRICULUM VITAE

WITH THIS APPLICATION.

Candidates may be shortlisted on the basis of information given in this Application Form.

**\*\*Interviews for those successfully shortlisted will be contacted.**

EXPLORE INISHOWEN CLG is an equal opportunities employer. The appointments are subject to normal recruitment procedures

APPLICATIONS BY E-MAIL ONLY

N.B. CANVASSING BY OR ON BEHALF OF THE APPLICANT

WILL AUTOMATICALLY DISQUALIFY.

**Additional/Relevant Information:** Please use this section to detail any other information you feel would be relevant to your application. You are encouraged to include experience of any voluntary/unpaid activities that you have been involved in. If including qualifications, please state the date they were obtained and the grade /level achieved. Attach and label any additional sheets used.