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| **Application Form**  **Principal Officer – Contract – Director of Operations/Board Secretary**  **in the Adoption Authority of Ireland** | | | | | |
| 1. **Personal Details:** Please fill in all fields | | | | | |
| Title: (Mr/Mrs/Ms): | | Surname: | | Forename(s) in full: | |
| Postal Address  Eircode: | | | | | |
| Contacts: Mobile Number: Email: | | | | | |
| Work Permit, are there any legal restrictions on your right to work in this country?  Please answer **Yes** or **No**. If yes, please supply details. | | | | | |
| Have you previously availed of a Voluntary Early Retirement Scheme or any other Redundancy Scheme in the public sector? Please answer **Yes** or **No**  If yes, do the terms of the scheme allow you to apply for this positon? Please answer **Yes** or **No.** | | | | | |
|  | | | | | |
| 1. **Qualifications:** Please provide details of any relevant qualifications you may hold | | | | | |
| Membership of Professional Associations | |  | | | |
| Academic, Professional or Technical Qualifications | |  | | | |
|  | | | | | |
| **3. Employment History:** Most recent employment position.  For your current or most recent employment position, please provide the following details. | | | | | |
| Name of Employer  (please also describe the nature of the business). | |  | | | |
| Address and telephone number | |  | | | |
| Position held | |  | | | |
| Describe main duties and responsibilities | |  | | | |
| Date of appointment | | From | | To | |
| Reason for leaving | |  | | | |
| If appointed what level of notice is required? | | | | | |
|  | |  | |  | |
| **Previous Employment**  Please give particulars of all employment starting with the appointment immediately preceding that described above | | | | | |
| From To | Employer Name and Address | | Position held and main responsibilities | | Reason for Leaving |
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| **4. REFERENCES:** Please provide details of two people who know you and from whom references may be obtained. It is preferable that at least one reference be from a person who knows you in a work context. | | | | | |
| 1. Referees name | |  | | | |
| Position | |  | | | |
| Nature of relationship (can include work colleague, manager, chair of sporting organisation). | |  | | | |
| Address | |  | | | |
| Telephone Numbers | |  | | | |
| Email | |  | | | |
|  | | | | | |
| 1. Referees name | |  | | | |
| Position | |  | | | |
| Nature of relationship | |  | | | |
| Address | |  | | | |
| Telephone Numbers | |  | | | |
| Email | |  | | | |
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| **DECLARATION**  I hereby certify and declare that all of the information that I have provided on this application has been honestly and accurately articulated to the best of my knowledge and belief. | | | | | |
| Name of Applicant | |  | | | |
| Signature | |  | | | |
| Date | |  | | | |
| Please ensure that you have provided all of the information for which you have been asked. A candidate found to have given false information or to have wilfully supressed any material fact will be liable to disqualification or, if appointed, to dismissal.  Please note that all personal data shall be treated as confidential in accordance with General Data Protection Regulations. | | | | | |