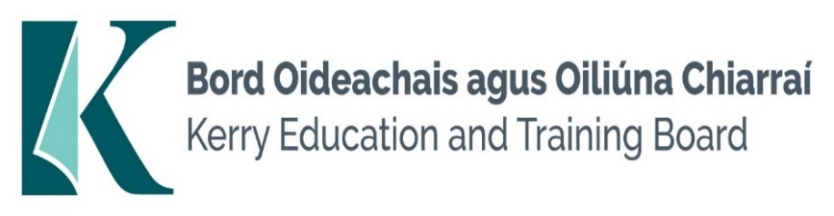
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Bus Escort Application Form

Completed application forms will only be accepted via email to [jobs@kerryetb.ie](mailto:jobs@kerryetb.ie). No CVs only official application form will be accepted.

**Please note that all areas of the application form must be fully completed giving as much detail as possible of your skills, abilities experience relating to this post application as shortlisting will be based on the information gathered from this form.**

1. **Personal Details**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name:** |  | | **Work No:** |  |
| **Address for** |  | | **Mobile No:** |  |
| **Correspondence:** |  | | **Home No:** |  |
|  |  | | **Email:** |  |
|  |  | |  |  |  |
| **Are you currently on career break?** | |  | | |
| **Have you availed of the Incentivised Scheme for Early retirement (ISER)?** | |  | | |
| **Are you in receipt of a state Pension?** | |  | | |

1. **Current or Most Recent Appointment**

Yes:  No: 

Are you currently employed by Kerry ETB?

If **yes**, complete section (a) below

If **no**, complete section (b) below

1. **Current employees of Kerry ETB**

|  |  |
| --- | --- |
| **Department/school/ adult education centre/programme** | **Title of Post** |
|  |  |
| **Nature of work** | **Starting date** |
|  |  |

1. **External applicants - where you work now, or your last job**

|  |  |
| --- | --- |
| **Employer’s name** |  |
| **Employer’s address** |  |
| **Starting date** |  |
| **Position held and nature of work** |  |
| **Leaving date (if applicable)** |  |
| **When could you be available for work, or what notice period is required by your current employer?** | |
|  | |
| **Reason for leaving if no longer employed?** | |
|  | |

Are there any restrictions on your right to work in Ireland?

Yes: No:

If yes, please give details:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you hold a full clean driving licence? Yes: No:

Please indicate classes covered by this licence: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**3. Previous Appointments**

Please list all your previous appointments. This should also include voluntary and temporary work. Continue on a separate sheet if necessary.

|  |  |  |  |
| --- | --- | --- | --- |
| **Dates employed to/from** | **Name & address**  **of Employer** | **Nature of work** | **Reason for**  **leaving** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

1. **Details of Qualifications**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Award** | **Institution** | **Areas of study** | **Year** | **Level of Award** |
|  |  |  |  |  |
|  |  |  |  |  |

You will be required to provide evidence of any qualifications stated.

**5. Any further information of relevance (Achievements, Interests, Membership of Organisations, etc)**

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

**Have you completed the TUSLA Child First Training**

**Please Tick**

Yes:  No: 

**please provide details of proficiency you may have (oral and/or written) in languages other than english**

|  |
| --- |
|  |

**6. Supporting Statement**

**How you meet the selection criteria**

Drawing upon your experience, skills, abilities and qualifications explain how you meet the selection criteria of the post (100 words max. per criteria).

|  |
| --- |
| Specialist Knowledge and Expertise: |
| Knowledge of Health and Safety: |
| Teamwork: |
| Customer Service and Communication Skills: |
| Delivery of results: |
| Drive and Commitment to Public Service Values: |

**7. Details of Referees**

Please give the names and addresses of two referees from whom Kerry ETB can request references on your behalf **prior** to interview. One should be a recent employer. Both referees should have been in a position of responsibility within the employing organisation(s). They must not be related to you, or be known to you only as a friend. If you are unable to provide these please give details of someone who knows you in other than a personal capacity and who is prepared to provide a reference for you.

[Please note: your referees will be contacted without further communication with you and prior to interview if shortlisted for interview]

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **1st Referee** | | | **2nd Referee** | | |
| **Name:** |  | | **Name:** |  | |
| **Organisation Name & Address** | | | **Organisation Name & Address** | | |
|  | | |  | | |
| **Telephone No./Ext & Email Address** | | | **Telephone No./Ext & Email Address** | | |
|  | | |  | | |
| **Position Held:** | |  | **Position Held:** | |  |
| **Your work connection with this referee** | | | **Your work connection with this referee** | | |
|  | | |  | | |
| **If you were known by another name when employed please specify:** | | | **If you were known by another name when employed please specify:** | | |
|  | | |  | | |
| **Dates of employment to/from (if applicable)** | | | **Dates of employment to/from (if applicable)** | | |
|  | | |  | | |

**8. Declaration**

**Please read before signing this application form**

The accuracy of information provided may be checked with other organisations. Provision of false or misleading information may amount to a criminal offence. Kerry ETB may obtain from or provide information to third parties for the purposes of the detection and prevention of crime.

The organisation may data match information it holds about its employees for the prevention and detection of crime.

I declare that the information I have provided is true and accurate and that I have not omitted any material facts. I accept that the offer of employment is conditional on the provision by me of true, accurate information with no material omissions.

I give my consent to Kerry ETB making such reasonable enquiries as it sees fit in respect of my application.

I accept that once I have commenced employment, Kerry ETB will be entitled to terminate my contract without notice or withdraw the offer of employment if information in this application is untrue or inaccurate or if there are material omissions from it.

Before signing this form, please ensure that you have replied fully to all questions asked.

|  |  |
| --- | --- |
| **Signature** | **Date** |
|  |  |