A close-up of a toy

Description automatically generated with low confidence

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| APPLICATION FOR THE POST OF KILDARE ABILITY EMPLOYMENT PROGRAMME COORDINATOR  **One Year Fixed Term Contract**  **The Application form must be TYPED. Handwritten forms will not be accepted.**  **All questions must be answered. Do not change the question numbers or sequence.**  **Boxes may be expanded as required – please comply with maximum word count requirements.**  **No letter of application, CV or written reference should accompany this form.** |

1. **Personal Details**

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| First Name: |  | Surname: |  |
| Home Address: |  | | |
| Home Phone Number: |  | Mobile Phone Number: |  |
| Email Address: |  |  |  |

Are there any restrictions regarding your employment? Yes □ No

*(If yes, please provide details on a separate sheet)*

Do you require a work permit? Yes □ No

1. **Present Position**

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| **Please give details of your current position** | | | |
| **Organisation** | **Location** | | **Job Title** |
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| **How much notice do you need to give your current employer** | |  | |

1. **Details of Qualifications**

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| **3.1 Primary Degrees/Diplomas;** | | | |
| **University/Institute/College:** |  | **Address:** |  |
| **Qualification (Pass/Hons):** |  | **Awarding Body:** |  |
| **Year of Entry:** |  | **Year Qualified:** |  |
| **Subjects Studied:** | | | |
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| **3.2 Post Graduate Degrees/Diplomas:** | | | |
| **University/Institute/College:** |  | **Address:** |  |
| **Qualification (Pass/Hons):** |  | **Awarding Body:** |  |
| **Year of Entry:** |  | **Year Qualified:** |  |
| **Subjects Studied:** | | | |
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| **Other Skills Training/Courses relevant to this Post:** | | |
| **Year Attended** | **Title of Skills Training** | **Training Body** |
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1. **Professional Management/ Leadership Development**

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| **4.1 Professional Management/Leadership Development:**  **List any management/leadership courses not included in Section 3 above. Please include dates of the relevant training and duration of these courses as well as additional qualifications. Start with the most recent and work backwards.** | | | |
| **Name of Course** | **Name of Organisation / Institution running course** | **Length of Course** | **Year** |
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| **4.2 What key skills and knowledge have you developed because of these courses that are relevant to this position?** |
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1. **Work Experience**

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| **5.1 Please provide details of your work history beginning with the most recent position:** | | | | |
| **Dates**  **(From/To)** | **Name & Address of Employer** | **Position Held & Whole-Time or Part-Time** | **Summary of Main Duties** | **Reasons for Leaving** |
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| **5.2 Other relevant experience (i.e. Social/Business) beginning with the most recent:** | | | |
| **Dates**  **(From/To)** | **Position** | **Education Centre or other Institution** | **Responsibilities** |
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| **5.3 List, outline dates, any extra-curricular activities in which you are or have been involved (beginning with the most recent):** |
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| **5.4 What aspects of your most recent experience, outlined above, have prepared you for the role of Ability Coordinator?** |
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**6. The Role and Function of Ability Coordinator**

A number of key competencies have been identified as being essential for the effective performance of the role and function of Ability Employment Programme Coordinator. These competencies are listed below:

* 1. **Leader – Training and mentoring**

**6.2 Leader – People and Teams**

**6.3 Leader-People, Person-centred development**

**6.4 Communication**

**6.5 Organisational Management and Administrative Skills**

**6.6 Self-Awareness and Self-Management**

Outline an example(s) on the following pages of how and where you have displayed each of these competencies (no more than 300 words per competency). The example(s) may be drawn from your own experience in various settings including professional, social, sporting or voluntary.

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| **6.1 Leader-Education and Training**  Understands that high quality training, mentoring and one-to-one work is the core business of the Ability Programme and demonstrates the skills to act as a leader and mentor. |
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| * 1. **Leader-People, Teams and Networks**   Demonstrates the inter-personal skills ability to develop individuals and teams and develop strong relationships with stakeholders |
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| * 1. **Leader-People, Person-centred development**   Demonstrates the inter-personal skills ability to gain trust, build relationships and develop focused progression for individuals |
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| * 1. **Communication**   Has the capacity to clearly articulate views, opinions and attitudes through effective and appropriate and empathic interaction with all stakeholders in a variety of situations and contexts. |
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| * 1. **Organisational Management and Administrative Skills**   Uses a range of resources, supports and processes to ensure the effective running and project management of the Programme. |
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| * 1. **Self-Awareness and Self-Management**   Is self-aware and has the capacity to self-manage and develop personally and professionally. |
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**7. Supporting Statement**

This section is for you to provide ***further information*** in support of your application. You should demonstrate why you have applied for the position and outline any other knowledge/expertise or attributes which you consider pertinent to the role of Ability Coordinator.

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**8. Details of Referees**

Please provide the names, addresses and positions/occupations of two people from whom County Kildare Leader Partnership (CKLP) can request references on your behalf. One should be a recent or most 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 as a friend. [Please note: your referees will be contacted without further communication with you. References may be taken up prior to interview. All appointments are subject to references satisfactory to CKLP.

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| **1st Referee** | **2nd Referee** |
| **Name:** | **Name:** |
| **Organisation Name:** | **Organisation Name:** |
| **Address:** | **Address:** |
| **Telephone No. & Ext:** | **Telephone No. & Ext:** |
| **Email Address:** | **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):** |

**9. Declaration**

If this section is not completed, your application will not be considered for processing.

Have you been investigated by the Gardaí, or your employer in relation to substantiated complaints made concerning your treatment of children?

Were you the subject of any allegation of criminal conduct or wrongdoing towards a minor?

Are you aware of any material circumstance in respect of your own conduct which touched/touches on the welfare of a minor?

Please note that it is a fundamental term of your employment that you make appropriate full disclosure in respect of the questions outlined above. You should also note that if CKLP is satisfied, in the future, that you have made an incomplete or inaccurate disclosure, you may face disciplinary action, up to and including dismissal.

CKLPs policy is that all newly appointed staff will be vetted via An Garda Síochána

**Please read before signing this application form**

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 CKLP making such reasonable enquiries as it sees fit in respect of my application. I accept that once I have commenced employment, CKLP 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.

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| **Signature** | **Date** |
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Completed application forms should be submitted to [**caroline@countykildarelp.ie**](mailto:caroline@countykildarelp.ie) to arrive no later than **4:00pm on Friday January 14th 2022.**

Canvassing will automatically disqualify a candidate.

###### CKLP is an Equal Opportunities Employer

**Please read all notes attached to this form prior to completing the competency based Application Form.**

A competency-based application form requires you, the candidate, to describe some of your personal achievements to date that demonstrate certain competencies (necessary skills/qualities) required for the position you are applying for.

A definition of a skill or quality is given for each competency. You are then asked to describe a situation, from your own experience, which you think is the best example of what you have done which demonstrates this skill or quality. It is essential that you describe how you demonstrated the skill or quality in question.

You are advised to structure what you write so that you give specific information about what you have done – for example, do not simply say that “X was successful”, you should describe exactly what you did and how you demonstrated the skill or quality in question.

For each example please include the following:

1. The nature of the task, problem or objective;
2. What you actually did and how you demonstrated the skill or quality (and, where appropriate, the date you demonstrated it);
3. The outcome or result of the situation and your estimate of the proportion of credit you can claim for the outcome;

**Please do not use the same example when illustrating your answer, referencing more than two skill areas.**

**PLEASE NOTE:** Should you be called for interview, the Interview Panel may look for additional examples of where you demonstrated the skills required for this post so, you should think of a number of examples of where you demonstrated each of the skills.

* The application must be typed. Handwritten forms will not be accepted
* All questions must be answered
* Do not change the question numbers or sequence
* Boxes may be expanded as required – please comply with the maximum word count
* Application is by official this Application Only. No CVs accepted
* No letter of application, CV or written reference should accompany this form
* Please take careful note of the closing date and time and submit your application in plenty of time, as late applications will not be accepted. CKLP accepts no responsibility for applications that are received late.

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