



# Congregation of the Most Holy Redeemer Dublin Province

Post applied for

Closing date

## JOB APPLICATION FORM

The information you supply on this form will be treated in confidence.

**Please complete all relevant fields.**

Your completed application form should be emailed to  
tmckernan@cssr.ie by 12 noon on Monday 20th November 2023.

### Section 1: Personal Details

Last Name

First Name

Address

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>

Postcode

Home Telephone

Nat. Insurance / PPS No.

Daytime Telephone

Mobile

E-mail Address

### Section 2: Employment Details

**1. Current Employment** (if now unemployed, give details of most recent employer)

Name of current or most recent Employer

Address

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>

Postcode

Post Title

Salary

Date started in post

Date left post (if no longer employed)

**Brief description of duties / key responsibilities**

**Period of notice**  
(if applicable)

**Last day of service**  
(if no longer employed)

**Reason for leaving**  
(if no longer employed)

**2. Previous Employment** (employer before current or most recent employer)

**Name of Employer**

**Address:**


**Post Title**

**Date started in post**

**Date left post**

**Brief description of duties**

**Reason for leaving:**

**3. Other Previous Employments (brief details)**

<b>Dates</b>	<b>Name of Employer</b>	<b>Title of Post</b>	<b>Key Responsibilities</b>	<b>Reason for Leaving</b>
From:  To:				
From:  To:				
From:  To:				
From:  To:				
From:  To:				
From:  To:				
From:  To:				
From:  To:				
From:  To:				

## Section 3: Education

### QUALIFICATIONS OBTAINED FROM SCHOOLS, COLLEGES AND UNIVERSITIES.

College or University	Course	Dates (from/to)	Qualifications/grades obtained
School	Subjects	Dates (from/to)	Qualifications/ grades obtained

Professional/Technical/ Management Qualifications	Course Details/Dates
<b>Membership of any Professional / Technical Associations: please state level of membership:</b>	

Please give details of any training and development courses or non-qualifications courses which support your application. Include any on the job training as well as formal courses.

Title of Training Programme or Course	Date(s) and Duration of Course

## Section 4: Suitability for the Advertised Post

Please describe below how you meet the essential criteria for this post. Please note that failure to complete this section and address the question fully will result in your application not being shortlisted.

## Section 5: Health

Successful applicants will be required to complete a detailed medical questionnaire and may be required to attend a medical examination prior to being appointed.

**Number of one/two days' sickness absence in the last 2 years**

**Number of times of longer sickness periods in the last 2 years**

**Have you ever had to resign, retire or been dismissed from a post for ill-health reasons?**

**YES**      **NO**      If YES, please give details below

### DISABILITY

**Do you require a reasonable adjustment for reasons of disability to allow you attend for interview, and/or undertake the duties of this post if successful?**

**YES**       **NO**       If YES, please give details below:

## Section 6: References

Please give the names and addresses of your two most recent employers (if applicable). If you are unable to do this, please clearly outline who your referees are. **Forms with no referees given WILL NOT be considered.**

	First Referee	Second Referee
<b>Name</b>		
<b>Position / Job Title</b>		
<b>Work Relationship</b>		
<b>Organisation/ Company</b>		
<b>Address</b>		
<b>Tel</b>		
<b>Mobile</b>		
<b>E-mail</b>		
	Are you willing for this referee to be approached <b>prior</b> to the interview?  Yes <input type="checkbox"/> No <input type="checkbox"/>	Are you willing for this referee to be approached <b>prior</b> to the interview?  Yes <input type="checkbox"/> No <input type="checkbox"/>

**DRIVING LICENCE (if relevant to post applied for)**

Do you hold a full, clean driving licence valid in Ireland?

Yes     No

*If relevant, bring a copy of your licence to interview.*

**REHABILITATION OF OFFENDER (EXCEPTIONS) ORDER NI 1979 and SEX OFFENDERS ACT 2001 (ROI)**

Do you have any criminal convictions?    YES     No     If YES, please give details below:

