Foirm iarratais do phost *Job application form*

Líon isteach an fhoirm i nGaeilge ná i mBéarla i ndúch dubh ná clóscríobh

*Please complete the form in black ink or type*

**Post - position applied for** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**dáta deiridh - closing date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**1.) Sonraí pearsanta/*personal details***

Ainm/*name*

Seoladh/*Address*

Uimhir ghuthain(lá) Uimhir ghuthain(oíche)

*Phone (daytime*) *Phone (evening)*

Dáta Breithe Uimhir Árachais

*Date of Birth* *National Insurance no*

**2.) Oideachas/*Education***

|  |  |  |  |
| --- | --- | --- | --- |
| **Torthaí Scrúdaithe GCSE**  ***O level results & grades*** | **Bliain**  **Year** | **Torthaí Scrúdaithe A leibhéal**  **A level Results & grades** | **Bliain**  **Year** |
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**Ard oideachas/Further Education**

|  |  |  |  |
| --- | --- | --- | --- |
| Ollscoil/Coláiste  University/College | Dátaí  Dates | Ábhair  Subjects | Cáilíochtaí  Qualifications |
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**Cáilíochtaí gairmiúla ná proifisiúnta/ cúrsaí traenála ag baint leis an phost**

**Professional or vocational qualifications/relevant training courses**

|  |  |
| --- | --- |
| Ainm an ghrúpa  Name of the body | Toradh/cáilíocht/Cúrsa/ dáta  Exam/Qualification/Course/ Date |
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**3.) Sonraithe d’fhostaitheora (má tá tú fostaithe)**

**Details of present employer (if employed)**

**Name and Address:-**

**Job Title:-**

# Duties and Responsibilities:-

4.) **Taithí oibre Work Experience**

|  |
| --- |
| Scríobh síos, ag toiseacht leis an phost is déanaí, na postanna a bhí agat agus cur síos gairid ar do churaimí oibre agus na dátaí.  Please list, starting with the latest, any previous positions you have held, with a brief description of duties and dates. |

**5.) Mí chumas/Disability**

An bhfuil tú cláraithe mar dhuine le mí-chumas ná i dteideal **Tá/Yes**

bheith cláraithe?

Are you registered disabled or eligible for registration? **Níl/No**

**6.) Breoiteacht:** Má bhí tinneas mór ort ná gortú le dhá bhliain anuas breac síos na mionsonraithe. / Give details of any major illnesses or injury in the last two years,

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

**7.) Teistimeireachtaí:** - Tabhair ainmneacha beirt reiteoir, an fostóir reatha ina measc.

**References:-** Please give the names of two referees, one of whom should be your current or most recent employer.

# Ainm agus seoladh Name and address

# Ainm agus seoladh Name and Address

**8.) Dearbhú:-** Dearbhaím go bhfuil an t-eolas uilig ar an fhoirm seo fíor.

**Declaration:** - I declare that all the information in is this form is true and complete.

**Síniú dáta**

**Signature date**

Cuirtear an fhoirm líonta ar ais chuig

Return completed form to: - tara@androichead.com

**Tara Gibney, An Droichead,**

**20 Sráid Chúic,**

**Béal Feirste,**

**BT7 2EP**

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