CPSMA: APPLICATION FORM FOR THE POST OF

Development and Training Officer

**Instructions**

*Please complete this form in full by typing using a Word Processor. The table cells in this document will ‘expand’ as you type. The document is a Microsoft Word file.*

*The signed completed application form is to be forwarded by email only to* *applications@cpsma.ie* *to be received by the closing time and date of 5pm, Monday, 8thJuly 2019.*

***CPSMA will treat the information you provide in this Application in strict confidence and will only use the information in the context of evaluating your application for the post of Development and Training Officer.***

**Section 1: Contact Information**

|  |  |
| --- | --- |
| **NAME** |  |
| **CONTACT ADDRESS** |  |
| **PHONE** |  |
| **e-mail** |  |

**Section 2: Employment Record**

*Please provide details of your present and previous employment beginning with the most recent.*

|  |  |  |
| --- | --- | --- |
| **Employment Dates** | **Employer** | **Position** |
|  |  |  |
|  |  |  |

|  |
| --- |
| *Please briefly indicate those aspects of your employment to date that you consider advantageous to this present application.* |

**Section 3: Educational Record**

*Please provide details of your educational qualifications*

**Third Level**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Dates** | **Degree / Award** | **Classification** | **Undergraduate or Post-Graduate** | **Awarding Institution** |
|  |  |  |  |  |
|  |  |  |  |  |

**Professional or Continuing Education**

|  |  |  |
| --- | --- | --- |
| **Dates** | **Award** | **Provider Institution** |
|  |  |  |
|  |  |  |

**Leaving Certificate or Equivalent**

|  |
| --- |
| *Please indicate year of examination, subjects and results.* |

|  |
| --- |
| *Please briefly indicate those aspects of your Educational Record to date that you consider advantageous to this present application.* |

**Section 4: Qualifications, skill sets and previous experience**

*In the context of the Experience and Skills needed for the role of Development and Training Officer as outlined in the Job Specification please provide information on each of the following elements**below;*

|  |
| --- |
| **Commitment to the Catholic vision of Education:** |
| **Designing and delivering training events and courses:** |
| **Excellent administrative and management skills:** |
| **Strong oral and written communication skills:** |
| **Ability to deal with a multifaceted role:** |
| **Excellent presentation skills**  |
| **Capacity for self- management:** |
| **Ability to be an active and effective member of a highly professional team:** |
| **High Level proficiency in the use of IT, especially in the use of MS Word, Powerpoint, the internet and email:** |
| **Ability to develop constructive relationships and networks within and outside the organisation:** |
| **Knowledge and experience of the Irish primary education system, with particular reference to the work of Boards of Management of Catholic primary schools and Catholic Patronage:** |
| **Ability to provide/provide for training in Irish:** |
| **Full clean driver’s licence is required:** |

**Section 5: Other skill sets / experience to the advantage of applicant**

*Please provide information on those aspects below which you consider relevant to your application.*

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| --- |
| **Relevant Postgraduate academic qualification(s):** |
| **Other relevant qualifications / courses:** |
| **Availability to commence the post:** |

**Section 6: Personal Statement**

*Please provide a brief statement concerning your vision for the post of CPSMA Development and Training Executive.*

|  |
| --- |
| *(500 words max)* |

**Section 7: Nominated Referees**

*Please provide information concerning two people who have agreed to act as your referees.*

*Each referee should have an adequate understanding and an appreciation of your skillset of relevance to the position being applied for.*

*In nominating these two referees you are giving permission for the Chair of the Board of Directors or his agent to contact the nominated persons.*

**Referee 1**

|  |  |
| --- | --- |
| **Name** |  |
| **Position** |  |
| **Phone Number** |  |
| **e-mail** |  |

**Referee 2**

|  |  |
| --- | --- |
| **Name** |  |
| **Position** |  |
| **Phone Number** |  |
| **e-mail** |  |

**Section 8: Declaration**

*Please read and complete the declaration below*

I confirm that information that I have provided in this Application for the position of CPSMA Development and Training Executive is true and accurate.

I give permission for CPSMA to use this information for the sole purpose of evaluating my suitability for appointment to the post of Development and Training Executive.

|  |  |
| --- | --- |
| **NAME** |  |
| **DATE** |  |
| **SIGNATURE** |  |