Clermont Enterprise Hub is an equal opportunities employer

**APPLICATION FORM:**

**Wicklow Naturally Food Incubation Centre - Programme Manager**

**Notes:** Please return **FOUR APPLICATION FORMS** (one original plus three copies) to: Head of Enterprise, Local Enterprise Office Wicklow, Clermont House, Wicklow County Campus, Rathnew, County Wicklow before the closing date of **Monday 5th September 2022 at 12noon.**

The Application Form also needs to be submitted once by email before the closing date to enterprise@leo.wicklowcoco.ie .

However, the original form plus copies must be forwarded as soon as possible after the above closing date.

* Please read attached documentation carefully before completing.
* Do not attach any C.V.’s or related documents with this form.
* It is recommended that forms are typed and not hand written.
* Interviews may be held either in person or by online process through Microsoft Teams.

Before you return the form, please ensure the following:

(a) You have completed all sections and that you fulfil all the requirements set out in the Qualifications for the office.

(b) You have read the declaration at the end of the form and have signed your name as consent to same.

1. Please note that you may be asked to provide evidence of the National Framework of Qualifications level of your qualifications and copy of certificates verifying qualifications. The onus is on the candidates to establish eligibility in this application form.
2. Please note that applicants may be shortlisted on the basis of the information supplied on this application form.
3. Canvassing by or on behalf of the applicant will automatically disqualify.
4. Applications received after the closing time/date will **not** be considered.
5. Queries may be made to the Head of Enterprise, Tel 0404 30800 or enterprise@leo.wicklowcoco.ie

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| **SECTION A – PERSONAL DETAILS** |
| **Surname:** | **Forename(s):** |
| **Address:****(Notify at once in writing any change)** | **Home Telephone:** |
| **Work Telephone:** |
| **Mobile Tel Number:** |
| **Eircode:** | **Email address:** |

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| **SECTION B – EDUCATION, QUALIFICATIONS and TRAINING** |

1. **GENERAL EDUCATION:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Dates** | **Name of School (s)** | **Examinations Taken** | **Subject** | **Results** |
| **From** | **To** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

1. **ACADEMIC, PROFESSIONAL OR TECHNICAL QUALIFICATIONS:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Dates** | **University, College or Examining Authority** | **Qualification Obtained** | **Level in the National Frameworks of Qualifications** | **Year Qualification Obtained** | **Final Year Examination Subjects** |
| **From** | **To** |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

1. **PLEASE LIST ALL TRAINING COURSES UNDERTAKEN (EITHER IN-HOUSE OR PRIVATELY):**

|  |  |  |  |
| --- | --- | --- | --- |
| **Dates** | **Organisation/Body** | **Course Title** | **Qualifications obtained** |
| **From**  | **To** |  |  |  |
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| **SECTION C – EMPLOYMENT RECORD** |

Please give below, in date order **(starting with your current employer)** full details of all employment between the date of leaving school or college and the present dates. Please do not leave any period between these dates unaccounted for. If necessary, continue on a separate sheet, setting out the information in the same manner as below.

|  |  |  |
| --- | --- | --- |
| **Employer:** |  | **Dates:** |
| **From** | **To** |
| **Address:** |  |  |  |
| **Nature of Business:** |  |
| **Position Held:** |  |
| **Temporary or Permanent:** |  |
| **Description of Main Duties and Responsibilities:** |
| **Reason for Leaving:** |
|  |
| **Employer:** |  | **Dates:** |
| **From** | **To** |
| **Address:** |  |  |  |
| **Nature of Business:** |  |
| **Position Held:** |  |
| **Temporary or Permanent:** |  |
| **Description of Main Duties and Responsibilities:** |
| **Reason for Leaving:** |

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| **SECTION C – EMPLOYMENT RECORD Continued** |

|  |  |  |
| --- | --- | --- |
| **Employer:** |  | **Dates:** |
| **From** | **To** |
| **Address:** |  |  |  |
| **Nature of Business:** |  |
| **Position Held:** |  |
| **Temporary or Permanent:** |  |
| **Description of Main Duties and Responsibilities:** |
| **Reason for Leaving:** |

|  |  |  |
| --- | --- | --- |
| **Employer:** |  | **Dates:** |
| **From** | **To** |
| **Address:** |  |  |  |
| **Nature of Business:** |  |
| **Position Held:** |  |
| **Temporary or Permanent:** |  |
| **Description of Main Duties and Responsibilities:** |
| **Reason for Leaving:** |

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| **SECTION D – COMPETENCIES** |

**A number of key competencies (necessary skills and qualities) have been identified as being essential for the effective performance of the role of Business Advisor. Please refer to the Candidate Information Booklet.**

Short listing may apply based on the information supplied on the application form and the requirements of the position.

Outline one brief example of how and where you have displayed the competencies below. The example may be drawn from your experience in various settings including professional, community or voluntary. You may use the STAR (Situation, Task, Action and Result) to assist in your response.

**Candidates called for interview will be assessed on the following competencies:**

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| **MANAGEMENT AND LEADERSHIP: (Strategic Ability; Networking & Representing)****DELIVERING RESULTS: (Problem Solving & Decision Making; Operational Planning; Communicating Effectively)** |

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| **PERFORMANCE THROUGH PEOPLE: (Communication / Interpersonal Skills, Innovation & Initiative)** |

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| **SECTION D – COMPETENCIES CONTINUED** |

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| **COMMUNICATION & PERSONAL EFFECTIVENESS** ***(Understanding of the Role and Working Environment)*** |

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| **SECTION E – ADDITIONAL INFORMATION** |

**REFEREES:**

Give names and addresses of two responsible persons, to whom you are well known but not related (if you are, or have been in employment, referees should be existing or former employers of within at least 2 years)

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| --- | --- |
| **Name:** |  |
| **Position Held:** |  |
| **Address:** |  |
| **E-mail Address:** |  |
| **Contact Tel No.:** |  |
| **Details of Employer:** |  |
|  |
| **Name:** |  |
| **Position Held:** |  |
| **Address:** |  |
| **E-mail Address:** |  |
| **Contact Tel No.:** |  |
| **Details of Employer:** |  |

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| **Please use this space to outline any other information not already included which you feel may support your application e.g. leisure interest , hobbies, membership of clubs, travel, etc.**  |

Do you hold a current, full driving licence? **YES/NO**

If **YES,** please specify classes:

*Candidates must hold a full clean driving licence (Class B)*

***It is a requirement of Wicklow County Council that you take up duty within a period of not more than one month following an offer of employment.***

**AUTHORISATION & DECLARATION BY CANDIDATE**

* **I hereby authorise Clermont Enterprise Hub, if necessary, to verify separately my educational qualifications with any of the Educational Institutions that I attended.**
* **I hereby authorise Clermont Enterprise Hub CLG, if necessary, to undertake Garda Vetting.**
* **I solemnly declare that the replies to the questions written above by me to Clermont Enterprise Hub CLG are true and complete and I have not withheld any material fact. I note that any incorrect answer given by me, or the withholding of any material facts, may result in my not being considered for employment with Clermont Enterprise Hub CLG, or after employment, in my dismissal.**

**THE SUBMISSION OF THIS APPLICATION IS TAKEN AS CONSENT TO THE FOREGOING.**

**I, the undersigned, hereby solemnly declare all the foregoing particulars to be true.**

**SIGNATURE OF APPLICANT**: \_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ **DATE:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PLEASE TICK THIS BOX IF YOU WISH TO RECEIVE AN EMAIL ACKNOWLEDGING YOUR APPLICATION:**