

**Application Form**

 **Executive Officer- General**

Please read the information booklet carefully and expand word boxes as needed.

**Part A**

|  |  |
| --- | --- |
| Personal Details |  |
| First Name  |  |
| Surname  |  |
| Address  |  |
| Mobile Number  |  |
| Email Address  |  |

|  |  |
| --- | --- |
| Academic or Professional Qualifications  |  |
|  |  |
| Full Title |  |
| Awarding Body  |  |
| Year Obtained  |  |
| NFQ Level  |  |

|  |  |
| --- | --- |
|  |  |
| Full Title |  |
| Awarding Body  |  |
| Year Obtained  |  |
| NFQ Level  |  |

|  |  |
| --- | --- |
|  |  |
| Full Title |  |
| Awarding Body  |  |
| Year Obtained  |  |
| NFQ Level  |  |

|  |  |
| --- | --- |
|  |  |
| Full Title |  |
| Awarding Body  |  |
| Year Obtained  |  |
| NFQ Level  |  |

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| --- |
|  |
| MS Office | SKILL LEVEL *(PLEASE TICK TO INDICATE SKILL LEVEL)* |
| None | Basic | Intermediate | Expert |
| Word |  |  |  |  |
| PowerPoint |  |  |  |  |
| Excel |  |  |  |  |
|  |  |  |  |  |
| OTHER*(provide detail)* |  |  |  |  |

|  |  |
| --- | --- |
| Employment Details (start with current or last)  |  |
|  |  |
| Employer’s Name  |  |
| Dates(permanent/fixed term/temporary) |  |
| Job Title  |  |
| Main Duties and responsibilities  |  |

|  |  |
| --- | --- |
|  |  |
| Employer’s Name  |  |
| Dates(permanent/fixed term/temporary) |  |
| Job Title  |  |
| Main Duties and responsibilities  |  |

|  |  |
| --- | --- |
|  |  |
| Employer’s Name  |  |
| Dates(permanent/fixed term/temporary) |  |
| Job Title  |  |
| Main Duties and responsibilities  |  |



**Part B**

 **Executive Officer- General**

**Competencies, Skills, Knowledge, and Experience**

In this part of the application, please provide details on how your working experience, voluntary experience, or study meets the eligibility criteria for this post.

Please provide clear, detailed answers that demonstrate the depth and breadth of your experience in each area below, reflective of the requirements of this post. Please adhere to a word count of 250 words per each competency.

|  |
| --- |
| 1. Interpersonal and Communication Skills Experience
 |
| Provide an example of a time when you had to use your interpersonal & communication skills to get an important point across. |
|  |

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| --- |
| 1. Delivery of Results Experience
 |
| Please outline using examples how you delivered results either by managing a project or programme |
|  |

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| --- |
| 1. Organisational Skills
 |
| Please describe a time when you had to complete multiple projects/deadlines at once. |
|  |

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| 1. Analysis and Decision-making
 |
| Please provide an example of how and when you extracted & interpreted information to draw a conclusion |
|  |

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| 1. Specialist Knowledge and Expertise
 |
| Please provide details of your specialist knowledge and expertise that help you meet the specific requirements for this post.  |
|  |

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| 1. Additional Information (Optional)
 |
| Please provide any additional information you consider relevant to your application. |
|  |

 **Declaration**

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| --- |
| By submitting this application form: I hereby declare that I fulfil all the requirements set out for this position and that the information provided in this application form is correct. I understand that if it is subsequently discovered that any statement is false or misleading, I could be disqualified from the selection campaign.I understand canvassing will disqualify an applicant.I understand that this completed application form, may be shared with external members of the panel and I consent to same. |

|  |
| --- |
| Name & Signature  |
|  |

|  |
| --- |
| Date  |
|  |

* The onus is on candidates to establish eligibility on this application form.
* Please ensure that you have completed all sections and that you have completed the declaration above.
* Please email the application form to eorecruit@hea.ie
* If you have any queries relating to this application form or the information booklet, please contact eorecruit@hea.ie
* The deadline for applications is 17.00pm on **Friday, 24th of May 2024.**

**Appendix:**

**Recruitment Reasonable Accommodations Form**

If you would like to discuss any reasonable accommodations required during the recruitment process, please fill out the reasonable accommodations form below and return it to **dlo@hea.ie**. Your information will be treated with confidentiality and will not be disclosed to the shortlisting or interview panel without your prior agreement.

Do you require reasonable accommodations for a disability or difference?

Yes    No  

(If yes, please tick all that applies below)

**Nature Of Disability:**

 Blind / visual impairment

 Cognitive impairment (such as acquired brain injury)

 Deaf / hearing impairment

 Intellectual disability (such as Down Syndrome)

 Long standing illness or health condition (such as cancer, HIV, diabetes, heart disease, or epilepsy)

 Mental health condition (such as depression or schizophrenia)

 Neurodiverse (such as autism, ADHD, Asperger's, dyslexia or dyspraxia etc.)

 Other type of disability

 Physical impairment or mobility issues (such as difficulty using arms, using a wheelchair or illnesses affecting mobility such as Parkinson's Disease)

**Reasonable Accommodation Requested:**

We understand that the best judge of a reasonable accommodation is the person making the request and will endeavour to work with all applicants to provide reasonable accommodations to remove any challenges in accessing the recruitment process. Please detail below the reasonable accommodation you require.

If you have any further questions about reasonable accommodations, please contact HEA’s Disability Liaison Officer, at **dlo@hea.ie**