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| GalwayCoCo_Crest_Stacked_FC_S_RGB  **COMHAIRLE CHONTAE NA GAILLIMHE**  **GALWAY COUNTY COUNCIL** | |
| Ba cheart Foirmeacha Iarratais comhlánaithe a sheoladh ar ais chuig:  An Rannóg Acmhainní Daonna, Comhairle Chontae na Gaillimhe, Áras an Chontae, Cnoc na Radharc, Gaillimh nó ar ríomhphost chuig hr@galwaycoco.ie roimh an dáta deiridh | Completed Application Forms should be returned to;  Human Resources Department, Galway County Council, Áras an Chontae, Prospect Hill, Galway or emailed to hr@galwaycoco.ie by the closing date |

**DÁTA DEIRIDH / CLOSING DATE: 4pm Déardaoin 11ú Meán Fómhair 2025**

**4pm Thursday 11th September 2025**

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| **IARRATAS AR AN bPOST:** | **Stiúrthóir na Scéime Fostaíochta Pobail - Scéim Fostaíochta Pobail - An Baile Mór/An Mhainistir**  **(Conradh 1 Bliana)**  **Community Employment Scheme Supervisor – Laurencetown/Abbey Community Employment Scheme**  **(1 Year Contract)** |
| **POST APPLIED FOR:** |

**A copy of your current Driving Licence and all declared qualification documents must be submitted with your completed application form by the Closing date above. Incomplete applications will not be considered for this competition.**

Ní mór cóip de do Ceadúnas Tiomána agus na doiciméid cháilíochta dearbhaithe a chur isteach in éineacht le d'fhoirm iarratais chomhlánaithe faoin dáta Deiridh thuas. Ní chuirfear iarratais neamhiomlán san áireamh don chomórtas seo.

***Sloinne \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Céadainmeacha* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Surname First names

***(a) Seoladh* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

(a) Address **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Uimhreacha Gutháin: Baile \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Obair: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fón Póca: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Phone Numbers: Home Work: Mobile:

**R-phost: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Email:

**OIDEACHAS GINEARÁLTA/**GENERAL EDUCATION

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| Ó  From | Go  To | Scoil ar freastalaíodh uirthi  School attended | **Na Scrúdaithe a rinneadh (tabhair dátaí agus toradh)**  Examinations Taken –year of examination and result obtained |
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**CÁILÍOCHT ACADÚIL, GHAIRMIÚIL NÓ THEICNIÚIL (más ann)**

THIRD LEVEL ACADEMIC, PROFESSIONAL OR TECHNICAL QUALIFICATIONS (if any)

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| Ó  From | Go To | Coláiste ar freastalaíodh air  College Attended | **Na Scrúdaithe a rinneadh (tabhair dátaí agus toradh)**  Examinations Taken –year of examination and result obtained |
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**CÚRSAÍ / SCILEANNA / OILIÚINT / SUIMEANNA EILE MAR THACAÍOCHT DON IARRATAS**

OTHER COURSES / SKILLS / TRAINING / INTERESTS IN SUPPORT OF APPLICATION

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| Ó  From | Go  To | **Na Scrúdaithe a rinneadh (tabhair dátaí agus toradh)**  Examinations Taken – year of examination and result obtained |
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**STAIR FOSTAÍOCHTA – AG TOSÚ LEIS AN BHFOSTAÍOCHT IS DÉANAÍ**

EMPLOYMENT HISTORY – COMMENCING WITH MOST RECENT EMPLOYMENT

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| Ainm & Seoladh an Fhostóra  Name & Address of Employer | **Dátaí cruinne na Fostaíochta** Exact Dates of Employment | **Teideal an Phoist agus cur síos ar an bpost**  Title of Post and Job Description-Please include details of any supervisory experience, if any, attained in this role |
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| Fáiltíonn Comhairle Chontae na Gaillimhe roimh iarratais deiseanna fostaíochta, ó dhaoine le míchumas. Iarrtar eolas maidir le míchumas amháin chun gur féidir reitiúcháin chuí a dhéanamh d’agallamh más gá. | | | | | Galway County Council welcomes applications for job opportunities, from candidates with disabilities. Information in relation to disability is requested in order that appropriate arrangements for an interview can be made if necessary. | | | | |
| An bhfuil tú faoi mhí chumas, de réir an tAcht Míchumais 2005? | | | | | Do you have a disability, as per the Disability Act 2005? | Yes |  | No |  |
| Ta |  | Nil |  |  |  | | | | |
|  | | | | |  | | | | |
| Tabhair do chuid sonraí má theastaíonn réitiúcháin sonracha a dhéanamh, dhá nglaofaidh ort d’agallamh. M.sh Teanga Chomharthaíochta, nó aon socruithe riachtanach eile | | | | | Please give details if you need specific arrangements, should you be called for interview, e.g. Sign language or other necessary arrangements | | | | |

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| TEISTIMÉIREACHTAÍ:  Tabhair ainm agus seoladh beirt fhreagrach a bhfuil aithne mhaith acu ort, ach NACH bhfuil gaol agat leo. (má tá tú nó má bhí tú fostaithe, ba cheart gur fostóirí reatha nó iarfhostóirí a bheadh mar mholtóirí) | REFERENCES:  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) |
| **Ainm :**  Name: | **Ainm :**  Name: |
| **Post sa gcomhlacht:**  Position Held: | **Post sa gcomhlacht:**  Position Held: |
| **Seoladh :**  Address: | **Seoladh :**  Address: |
|  |  |
|  |  |
| **Uimh. Theagmhála:**  Contact Tel No: | **Uimh. Theagmhála:**  Contact Tel No: |
| **Nádúr an Ghaoil Eadraibh:**  Nature of Relationship: | **Nádúr an Ghaoil Eadraibh:**  Nature of Relationship: |

**Cén tréimhse fógra is gá duit a thabhairt san fhostaíocht reatha ina bhfuil tú ann?**

If successful, what period of notice are you required to give in your present employment? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| Sula síníonn tú an fhoirm seo, bí cinnte go bhfuil tú tar éis freagra a thabhairt ar na ceisteanna go léir. Bí cinnte go bhfuil tú incháilithe faoi na Cáilíochtaí. Ní féidir leis an gComhairle gealltanas a thabhairt go ndéanfaidh sí incháilitheacht iarratasóirí a iniúchadh roimh an agallamh/scrúdú; mar sin, d'fhéadfadh daoine nach bhfuil incháilithe, ach a chuireann isteach ar phost pé scéal é, costas a chur orthu féin gan ghá. Freastalaíonn iarrthóirí ar agallamh ar a gcostas fhéin.  IS FÉIDIR GEARRLIOSTÚ A DHÉANAMH AR IARRTHÓIRÍ DE RÉIR AN EOLAIS ATÁ CURTHA AR FÁIL AR A BHFOIRM IARRATAIS. | Before signing this form, please ensure that you have replied fully to all questions. You should also satisfy yourself that you are eligible under the Qualifications. The Council cannot undertake to investigate the eligibility of candidates in advance of the interview/examination, and hence persons who are ineligible but nevertheless enter may thus put themselves to unnecessary expense. Candidates attend for interview at their own expense.  CANDIDATES MAY BE SHORTLISTED ON THE BASIS OF INFORMATION SUPPLIED IN THEIR APPLICATION FORM. |

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| **DEARBHÚ** | **DECLARATION** |
| Dearbhaím go bhfuil na sonraí ar fad san iarratas seo fíor agus cruinn, chomh fada agus is eol dom. Is eol dom go ndícháileofar mé ón bpost atá á chuardach agam de bharr aon chanbhásáil don phost a dhéanaim féin, nó a dhéantar ar mo shon, agus go bhfuil aon fhostaíocht a ofráiltear dom ag brath ar an eolas atá tugtha anseo istigh a bheith cruinn.  Is eol dom go bhféadfaí deireadh a chur le haon fhostaíocht a bheadh ofráilte dom mar thoradh ar aon eolas bréagach nó míthreorach a bheith tugtha nó eolas a bheith fágtha ar lár d’aon turas. | I certify that all particulars in this application are true and correct, to the best of my knowledge and belief. I am aware that any canvassing by me, or on my behalf, will disqualify me from the position I am seeking and that any employment offered to me is dependent upon the information given herein being correct.  I am aware that false or misleading information or deliberate omissions may result in termination of any employment offered. |

***Síniú an Iarratasóra:* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dáta: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Signature of Applicant Date:

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| Tá an t-eolas atá curtha ar fáil ar an bhfoirm seo coinnithe ar thuiscint rúndachta de réir riachtanais an Acht um Shaoráil Faisnéise 1997 nó riachtanais dlíthiúla eile. | The information supplied in this form is held on the understanding of confidence subject to the requirements of the Freedom of Information Act 1997 or other legal requirements. |

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| **Application Form Checklist** |
| * All application forms must be submitted fully completed and inclusive of all the requested documentation (Educational Qualification Documents and Driving Licence) by **the closing date.** All **incomplete applications** will be returned as **invalid** after the closing date and will not be included in the competition. |
| * All information must only be provided on the formal application form. Additional information via Curriculum Vitae **will not** be considered. |
| * Ensure that you have answered all questions fully. |
| * Copies of Educational qualifications & driving licence (not originals), i.e. Leaving Certificate, degree etc., whichever is applicable in your case, must be submitted with your application. Original certificates will be required prior to any appointment. |
| * Applications may be submitted by email to [hr@galwaycoco.ie](mailto:hr@galwaycoco.ie) providing all required information is included on the application (i.e. scanned copy of educational qualifications, driving licence etc.) |
| * Applications will be short-listed on the basis of the information provided on the application form and therefore you should ensure that you have fully completed your application, and all documentation requested is submitted. |
| * Candidates who send their applications by post should allow sufficient time to ensure delivery not later than the latest time for acceptance. The responsibility rests with the applicant to ensure the application form, in full, along with all requested documentation is **received** on time by the Human Resources Department, Galway County Council. |
| * Claims that any application form or letter relating to it has been lost or delayed in the post will not be considered unless a Post Office Certificate of posting is produced in support of such claims. The responsibility to make contact with An Post regarding any delays rests with the applicant. |
| * Please notify the Human Resources Department of any change of address. |
| * Please include your contact telephone numbers and email address with your application form. |

**The onus rests with the applicant to ensure that his/her application form and all required documentation is received by the Human Resources prior to the competition closing date.**