

**Confidential Application Form**

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| **APPLICATION FORM for the post of:****Project Officer, Training and Development**  | **Please indicate the location you are applying for by ticking the relevant box:****Cork** 🗖**Dublin** 🗖 |

Please complete each section of this application as fully and as carefully as possible using black lettering as applications will be short-listed on the basis of the information provided on this form. It is imperative that all sections of this application form are completed in full.

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| 1. **Surname:**
 | **Other Names:** *(in full)* **Title:** *Mr □ Ms □ Miss □ Other (please specify)* |
| 1. **Address for Correspondence:**
 | **Telephone:****Home:** **Work:** **Mobile:** **Email:**  |
| 1. **Work Permit:** Are there any legal restrictions on your right to work in this Country? Yes □ No □ (If yes, please supply details)
 |
| 1. **Source of Application:**

*(Please state name of Newspaper, Periodical; Internet, Internal)* |
| **5. Have you previously availed of a Voluntary Early Retirement Scheme or any other Redundancy Scheme**  **in the Public Sector?****Yes □****No □****If yes, do the terms of the Scheme allow you to apply for this position?****Yes □****No □** |
| **6. Declaration:** I understand that as a condition of employment, the information presented in this application form is correct to  the best of my knowledge.**Signed:** **Date:** *(Please note – if emailing application, signature not required)*Please note that all personal data shall be treated as confidential in accordance with the Data Protection Acts 1988 & 2003. |
| This form should be completed and returned to:  [**https://www.sigmarrecruitment.com/clients/hiqa**](https://www.sigmarrecruitment.com/clients/hiqa) **CLOSING DATE: 5pm Monday 2nd July 2018** |

**Please note that all correspondence will be via email unless otherwise stated.**

| **7. Educational Information**  University or other Third Level Institute Candidates should outline all details regarding Academic, Professional, Technical and Clinical Qualifications ***Candidates will be required to produce evidence of qualifications on appointment*** |
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| Name of Institute | Years Attended(DD/MM/YYYY)To From | Qualification Obtained | Conferring Body |
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| **8. Details of Experience** *(Please list positions held, commencing with most recent employer, continuing on an extra sheet if necessary).* *Please state for each position held if the role is Temporary, Permanent or Acting*  |
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| Date(DD/MM/YYYY)From To | Name & Address of Employer andNature of Business | Job Title and Description of Duties with special emphasis on experience relevant to the post. Please include reason for leaving. |
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| **9.** Please indicate your experience in conducting or providing training in the conduct of research projects, literature reviews, or desktop research. Please detail below (in months) your experience to date that demonstrates your fulfilling of this essential criteria. **Please note that the information supplied here will be used to determine your eligibility for this campaign.**

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| **From Date** **00/00/00**  | **To Date****00/00/00** | **Total Months**  | **Employer** | **Title of Post** |
| ***e.g.*** *05/06/12* | *05/06/15* | *36* | *HIQA* | *Standards Programme Coordinator* |
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| **Total Cumulative Months:** |  |  |

**10. Further Particulars of Present Post**Additional Information (successful candidates may be asked to supply documentary evidence in support of stated salary) |
| Current Salary Scale:  | Additional Allowances: |
| Present Remuneration:  | Notice Required:  |
| **11. Membership of Professional Associations, Institutions, etc.** *(where appropriate)* |
| **12. Interview Arrangements (**Please provide details of any special arrangements in relation to either  communications or access which you may require at the interview centre): |
| **13. Have you previously applied for a position in the Health Information and Quality Authority?**  |
| **14. Particulars of Referees:** Please give the name and contact details of three work related referees, one of whom must be your current line manager / employer. Please note that your referees will not be contacted without your  Permission.  |
| **Name** | **Position or Occupation** | **Postal / E-mail Address. Tel. No.** |
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**Supplementary Information regarding Essential Criteria and Core Competencies**

In this section, we ask you to demonstrate, using detailed examples, how you meet the essential criteria and two of the core competencies outlined in the job description. ***(A max of 250 words for each section 1, 2 and 3).***

The information you provide will form part of the short listing process. Therefore, compose your replies carefully and try to structure what you write so that you give specific information about what you have done.

**1.** *Please describe your experience conducting or providing training in the conduct of research projects, literature reviews, or desktop research in the area of health information or health services research. (250 words)*

1. *Please demonstrate how you have organised and provided training and / or educational sessions (250 words)*

**3.** *Please detail your understanding of the importance of capturing user experience for service delivery, monitoring and planning. (250 words)*