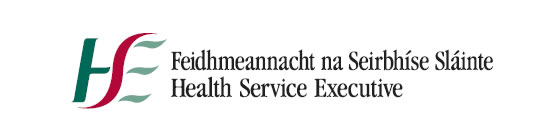
**All sections to be completed in full**



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| APPLICATION FORM **Multi Task Attendant**  **(21MTAIDSECH)**  **Wexford, South Tipperary, Kilkenny.** |

Please carefully note the following instructions:

* Please ensure you fully read and understand the ‘Additional Campaign Information for Candidates and job description specific to this campaign that is available on [http://www.hse.ie/eng/staff/jobs/job\_ search/](http://www.hse.ie/eng/staff/jobs/job_search/)

1. Please ensure you read in full, the instructions for the completion of this application form and complete all areas, including the supplementary questions section, in full. Failure to complete all areas of the application form may result in you not being brought forward to the interview stage of the selection process.

* Candidates should note that there can be a time delay in receiving email applications. We recommend that applicants wishing to return an application by email should allow a minimum of 1 hour for their application to reach **WRIDSSECH@HSE.IE**
* Applications must be submitted as a Microsoft Word or PDF document format only. Applications stored on personal online storage sites, e.g. Skydrive, Cloud, Dropbox, Google Drive etc will not be accepted, applications submitted in other file formats e.g. Google Docs will not be accepted. Please pay particular attention to ensure that your application is attached as an attachment (not a link to an on line storage site e.g. Google Drive) when emailing your application. To ensure that you do not miss out on any email communication it is highly recommended that you check your spam and junk folder on a regular basis.
* In relation to details of employment, if the space provided is insufficient, please attach additional pages ensuring to use the same format.
* Please read the Job Specification which provides useful information about the requirements of this post.
* The Health Service Executive will run this campaign in compliance with the Code of Practice prepared by the Commission for Public Service Appointments (CPSA). The Codes of Practice are available on the CPSA website [www.cpsa.ie](http://www.cpsa.ie/). Further information is also available in the Additional Campaign Information document.
* The Health Service Executive is an Equal Opportunities Employer.
* The Health Service Executive recognises its responsibilities under the Data Protection Acts 1988 to 2018 and the Freedom of Information Act 2014.

***Please return completed application form to:***

|  |
| --- |
| **Email:** **WRIDSSECH@HSE.IE** (quoting Multi Task Attendant - Intellectual Disability in the subject line) |

|  |  |
| --- | --- |
| **Post: Multi Task Attendant (MTA)** | |
| **Closing date for applications:** | **Rolling Campaign** |
|  | |

Applicant Details:

|  |  |
| --- | --- |
| The position you wish to apply for: | **Multi Task Attendant** |
|  | **21MTAIDSEHC** |
|  |  |
| **Personal Details:** |  |
| First name : |  |
|  |  |
| Last Name: |  |
|  |  |
| Address for correspondence: | |
|  |  |

|  |  |
| --- | --- |
| **MOBILE TELEPHONE *(mandatory)***: |  |
|  |  |
| **Contact Tel No. 2:** |  |
| **E-mail Address** ***(mandatory)***:  ***(You may provide more than one)*** |  |
| **PPS Number** ***(mandatory)***: |  |

|  |
| --- |
| **Where did you see this position advertised?** |
|  |
| **European Economic Area**  Are you an EEA (European Economic Area) National? Yes  / No  Please see Appendix 2 of Additional Campaign Information document for definition of an EEA National.  **NB If you are a non EEA citizen you must provide the requested documentation to support your application**. For further information you must read “Appendix 2” in the “Additional Campaign Information” document. |
|  |

**QUALIFICATIONS & ELIGIBILITY CRITERIA**

**In this area of the application form we ask you to please outline your educational experience qualifications and professional experience.**

**We will then examine how your particular experience and qualifications meet any specific criteria for the post of MTA. Educational eligibility will be decided based on the information provided here. Please note if you omit information in this section pertinent to the eligibility criteria you may be deemed ineligible and subsequently not called to interview**

**Please details all information which applies to your individual educational qualification(s) in the space provided below.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Educational Achievement** | **Yes/No** | **Name of Course** | **School/College** | **Date of Award**  **00/00/0000** |
| **Intermediate/Junior Certificate** |  |  |  |  |
| **Leaving/Applied Leaving Certificate** |  |  |  |  |
| **Post Leaving Certificate Course** |  |  |  |  |
| **Certificate** |  |  |  |  |
| **Diploma** |  |  |  |  |
| **Degree** |  |  |  |  |
| **Other\*** |  |  |  |  |

**Other\* - equivalent qualification not listed above e.g. G.C.S.E, A-Levels etc**

**Additional Educational Qualification**

**Please detail below if you hold a Certificate in Health Care at FETAC Level 5**

|  |  |  |
| --- | --- | --- |
| **Educational Achievement**  **I currently possess** | **Name of Course** | **Date of Award**  **00/00/0000** |
| (i) The relevant QQI Further Education and Training (FET) Level 5 Certificate in Health Service Skills  **or** |  |  |
| ii) FETAC Level 5 Certificate in Health Service Skills or Healthcare  Support  **or** |  |  |
| (iii) A relevant Healthcare qualification from another jurisdiction  **or** |  |  |

(iv) I am employed as an Attendant, Multi Task or a comparable role and am willing to undertake a QQI/FET Level 5 programme in Health Service Skills or equivalent. Yes □ No □

**When submitting your application form please submit a copy of your Health Skills FETAC / QQI Level 5 (or equivalent) transcript of results.**

|  |  |
| --- | --- |
| **Drivers Licence *(please state type & category):*** |  |

**When submitting your application form please submit a copy of your Driving Licence.**

**CURRENT CONTRACTUAL STATUS**

**I am currently a HSE employee\* Yes**  **No**

**Please tick the HSE Area in which you work**

|  |  |  |  |
| --- | --- | --- | --- |
| Dublin Mid Leinster |  | South |  |
| Dublin North East |  | West |  |

If you answered yes to the above question, please choose the option below which best matches your current contractual status:

* **I have a permanent contract**

**or**

* **I have a temporary contract**

\*HSE Employee = you are a direct employee of the HSE and not in a post funded or partially funded by the HSE

|  |  |
| --- | --- |
| **What is your current employment title?** |  |
| **Current Grade/ Level as per Consolidated Pay Scales *e.g. Senior Physiotherapist, Clinical Nurse Manager 2, Clerical Officer Grade III etc.*** |  |
| **Date of your appointment to this post** |  |

**Proficiency in Irish**

Candidates will be afforded the added opportunity to demonstrate their ability to perform the duties of the office through Irish. This assessment will be on a pass/fail basis and will not disturb the marks awarded in the selection process. Where vacancies arise for which proficiency in Irish is a management requirement, the HSE will offer such posts in order of merit to candidates who have successfully passed the Irish assessment. Please indicate if you wish to undertake an Irish assessment exam Yes  / No

**Please tick Yes/No as appropriate**

|  |  |  |
| --- | --- | --- |
| **Are you currently in receipt of a pension from any of the following superannuation schemes?** | **YES** | **NO** |
| **Local Government Superannuation Scheme (LGSS)** |  |  |
| **Health Service Executive Employee Superannuation Scheme** |  |  |
| **Voluntary Hospital’s Superannuation Scheme (VHSS)** |  |  |
| **Nominated Health Agencies Superannuation Scheme (NHASS)** |  |  |

If you have answered **‘yes’** in relation to any of the above Superannuation Schemes you are not eligible to apply for this recruitment campaign. Former Health Service and public sector employees must ensure that they adhere to their contractual obligations where they have previously availed of the Incentivised Scheme of Early Retirement (ISER), 2010 Voluntary Early Retirement Scheme (VER) or 2010 Voluntary Redundancy Scheme (VRS). Please read Appendix 4 in ‘Additional Campaign Information’ for further details.

**EEA Nationals**

EEA nationals who do not require work permits / visas / authorizations are nationals of the following countries: Austria, Belgium, Denmark, Finland, France, Germany, Greece, Ireland, Italy, Luxembourg, The Netherlands, Portugal, Spain, Sweden, United Kingdom, Cyprus, Czech Republic, Estonia, Hungary, Latvia, Lithuania, Malta, Poland, Slovakia, Slovenia, Norway, Iceland, Liechtenstein, Switzerland, Bulgaria and Romania.

**NON-EUROPEAN ECONOMIC AREA APPLICANTS WHO RESIDE WITHIN THE STATE.**

In order that we can process your application it will be necessary for you to provide the HSE with the relevant documentation showing you have permission to be in this state and have the relevant work permit/visa/authorization required to be employed within this state.

For more details on EEA countries please visit the Department of Jobs, Enterprise and Innovation website [www.djei.ie](http://www.djei.ie)

|  |
| --- |
| **Please provide details of Work Permit/Visa/Authorization below** |
|  |

### DETAILED CAREER HISTORY – listing the most recent first

**Please ensure all career history is clearly outlined below (e.g. if you took a career break, spent time out of work, please include this information so there are no gaps in your career history from when you left full-time education to present date).**

**If you work in a part-time capacity please list your monthly hours and total months of work.**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **From Date 00/00/00** | **To Date**  **00/00/00** | **Average Monthly Hours** | **Total Months** | **Name of Employer** | **Title of Post** | **List of Duties** |
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**ELIGIBILITY CRITERIA, QUALIFICATIONS and/or EXPERIENCE**

|  |  |
| --- | --- |
| **Teamwork Experience Relevant To The Role**  Please indicate below how your experience meets the requirements of the post. This section will be assessed by a board of Senior Managers to consider your experience as it is relevant to the post.  Short listing may occur based on the information provided here and in the other areas of this application form. Please complete each section below.  *Please include dates i.e. from x date to x date, the name of the employer /department you worked in.* | |
| **Date(s) from – Date(s) to** | **Employer(s) & Department Name** |
|  |  |
| **In the space below, please give an example of a situation where you best demonstrated your willingness to co-operate and work with other team members**: | |

**Declaration:**

It is important that you read this Declaration carefully and then sign it in the space below.

**Part 1:** Obligations Placed on Candidates who participate in The Recruitment Process.

The Public Services Management (Recruitment and Selection) Act 2004 makes very specific provisions in relation to the responsibilities placed on candidates who participate in recruitment campaigns and these are detailed in Section 4 of the Code of Practice issued under the Act.

These obligations are as follows:

Any canvassing by or on behalf of candidates shall result in disqualification and exclusion from the recruitment process. Candidates shall not:

* knowingly or recklessly make a false or a misleading application
* knowingly or recklessly provide false information or documentation
* canvass any person with or without inducements
* impersonate a candidate at any stage of the process
* knowingly or maliciously obstruct or interfere with the recruitment process
* knowingly and without lawful authority take any action that could result in the compromising of any test material or of any evaluation of it
* interfere with or compromise the process in any way

Any person who contravenes the above provisions, or who assists another person in contravening the above provisions, shall be guilty of an offence.

It is the policy of the HSE to report any such above contraventions to An Garda Siochana.

In addition, where a person found guilty of an offence was or is a candidate at a recruitment / selection process, then, in accordance with the Public Services Management (Recruitment and Selection) Act 2004:

* where he / she has not been appointed to a post, he / shall be disqualified as a candidate; and
* where he / she has been appointed as a result of that process, he / she shall forfeit that appointment.

**Part 2**

**Declaration:** “I declare that to the best of my knowledge and belief there is nothing in relation to my conduct, character or personal background of any nature that would adversely affect the position of trust in which I would be placed by virtue of my appointment to this position. I hereby confirm my irrevocable consent to the Health Service Executive to the making of such enquiries, as the Health Service Executive deems necessary in respect of my suitability for the post in respect of which this application is made.

I hereby accept and confirm the entitlement of the Health Service Executive to reject my application or terminate my employment (in the event of a contract of employment having been entered into) if I have omitted to furnish the Health Service Executive with any information relevant to my application or to my continued employment with the Health Service Executive or where I have made any false statement or misrepresentation relevant to this application or my continuing employment with the Health Service

Executive.

Furthermore, I hereby declare that all the particulars furnished in connection with this application are true, and that I am aware of the qualifications and particulars for this position. I understand that I may be required to submit documentary evidence in support of any particulars given by me on my Application Form. I understand that any false or misleading information submitted by me will render me liable to automatic disqualification or render me liable to dismissal, if employed.”

Failure to sign application will render it invalid[[1]](#footnote-1).

**Signed:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*(Name of Applicant)* **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### References:

Please give **three** referees (including your current employer). We retain the right to contact all previous employers. Do you wish us to contact you prior to contacting your referees?

|  |  |  |  |
| --- | --- | --- | --- |
| Yes: |  | No: |  |

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| --- | --- | --- | --- |
| **1. Name and Job Title of Referee:** | |  | |
| Professional Relationship to candidate: | |  | |
| Postal Address: | |  | |
|  | |
|  | |
| Telephone Contact Details: | | Mobile: | Landline: |
|  | | | |
| Email Address: |  | | |

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|  |  |  |  |
| --- | --- | --- | --- |
| **2. Name and Job Title of Referee:** | |  | |
| Professional Relationship to candidate: | |  | |
| Postal Address: | |  | |
|  | |
|  | |
| Telephone Contact Details: | | Mobile: | Landline: |
|  | | | |
| Email Address: |  | | |
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| --- | --- | --- |
| **3. Name and Job Title of Referee:** |  | |
| Professional Relationship to candidate: |  | |
| Postal Address: |  | |
|  | |
|  | |
| Telephone Contact Details: | Mobile: | Landline: |
|  | | |
| Email Address: |  | |

**Applicant Checklist**

We recommend that you check your application form carefully to ensure that you have included / clearly illustrated / answered:

|  |  |  |  |
| --- | --- | --- | --- |
| 1 | Mobile Telephone Number  Email Address  Postal Address  PPS Number |  | **Mandatory** |
| 2 | That the information you have provided with regard to your eligibility to apply shows clear dates e.g. DD/MM/YY, periods of employment, job titles, education courses, college names, qualification titles |  |  |
| 3 | Work Permit Documentation (if relevant to non EU applicants) (Please refer to Appendix 2 of the Additional Campaign information document for details of documentation required) |  |  |
| 4 | That you have downloaded or printed the job specification and Additional Campaign Information for future reference. | | |

**If all required details / documentation (as above) are not submitted with your application we will be unable to process your application to the next stage of the process i.e. short listing / interview.**

1. If you are submitting your application form via email we will accept the application form unsigned but you will be required to sign the Declaration at interview should you be invited to one. [↑](#footnote-ref-1)