**Wexford County Council**

**Application for**

**Pilot Summer Student Scheme**

**Closing date for receipt of applications is 5.00 pm on THURSDAY 24th May 2018**

1. NAME IN FULL (use BLOCK LETTERS):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**2.** POSTAL ADDRESS (Notify at once, in writing, any change of address):

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

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**3.** Tel. No(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Home) (Mobile) Work (if you may be contacted there)

**4.** E-mail Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**5.** Do you claim to fulfill all the requirements set out in the Qualifications for the post?**Yes** **No**

**6**. REFERENCES: (Please give below the names and addresses of your present or most recent employers, or responsible persons, to whom you are not related, whom we can contact for a reference).

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **Address** | **Relationship to you** | **Contact Details** |
|  |  |  | Phone:  Email: |
|  |  |  | Phone:  Email: |

Do you have any objections to the Council seeking references ?

Yes: No:

**7. GENERAL EDUCATION:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **2nd Level School Attended** | **From** | **To** | **Examination** | **Results** |
|  |  |  |  |  |
| **3rd Level College Attended** |  |  |  |  |
|  |  |  |  |  |

***As applicants may be shortlisted on basis of information supplied in application forms you should ensure that information given is sufficiently comprehensive.***

8. ACADEMIC AND/OR PROFESSIONAL QUALIFICATIONS:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Title of 3rd Level Course currently being undertaken** | **Level** | **Subject(s) in final exam** | **University, College or Examining Authority** | **Course** |
|  |  |  |  | Course Duration (yrs ) |

Please indicate the particular qualities or experience you possess that will enable you to contribute to the work of the Council in this position.

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**Do you require any special facilities/arrangements for interview? (If yes, please specify):-**

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I hereby declare that I fulfill all the requirements set out in the Qualifications, that the information given in this form is correct and give my permission for enquiries to be made to establish such matters as qualifications, experience and character and for the release by other people or organisations of such information as may be necessary for that purpose. This may include enquiries from past/present employers and the submission of the application is taken as consent to this.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Note to candidates:**

###### Completed application forms must be forwarded to The Personnel Officer, Wexford County Council, Carricklawn, Wexford, no later than 5.00 p.m. on THURSDAY 24th MAY 2018.

* **Please do include a CV, additional information may be submitted on a separate sheet if necessary.**
* **Application forms received after closing time & date will not be considered.**

**WEXFORD COUNTY COUNCIL IS AN EQUAL OPPPORTUNITIES EMPLOYER**