

**APPLICATION FOR TRAINEESHIP INSTRUCTOR POSTS x 3**

**Advanced Manufacturing**

**Post Ref. No. 25/08**

**Please complete all sections of this form.**

**All applications will be treated as confidential**

1. **Personal details**

|  |  |
| --- | --- |
| **Surname:** |  |
| **First Name(s):** |  |
| **Home Address:**  **Eircode:** |  |
| **Contact Details:**  **Mobile:**  **E-mail:** |  |
| **Eligibility Criteria:** | **do you hold a relevant trade qualification? Yes 🞐**  **are you eligible to work in the republic of ireland? Yes 🞐** |

**PREFERRED OPTIONS**

Please indicate which type of Post you would be interested in:

Fulltime Permanent  Part-Time  Casual/Cover 

Were you previously employed as an apprenticeship Instructor

In any capacity. If so, please give details  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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

**TRAINING QUALIFICATIONS**

Do you hold a recognised training qualification? Yes (give details below)  No\*

**(all applicants taking up a post who do not hold a formal qualification will be required to undergo an accredited training delivery course as part of the induction process)**

1. **Education/Training & qualifications- (you will be required to provide evidence of qualifications at selection stage)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Craft / College / School** | **From**  **(mm/yy)** | **To**  **(mm/yy)** | **Course** | **Qualification Obtained**  **& NFQ Level** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

1. **Employment history**

**Please give details of your work history beginning with the most recent position. Note: Please Copy and Paste the table below to add information on other relevant employment.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name and Address of Employer:** |  | | | |
| **Job Title:** |  | | | |
| **Duration:** | **From: (month & Year)** |  | **To: (month & year)** |  |
| **Job Details and Responsibilities:** | | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name and Address of Employer:** |  | | | |
| **Job Title:** |  | | | |
| **Duration:** | **From: (month & Year)** |  | **To: (month & year)** |  |
| **Job Details and Responsibilities:** | | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name and Address of Employer:** |  | | | |
| **Job Title:** |  | | | |
| **Duration:** | **From: (month & Year)** |  | **To: (month & year)** |  |
| **Job Details and Responsibilities:** | | | | |

1. **EXPERIENCE**

**All applicants will be assessed across the following areas:**

* Relevant experience and knowledge of the trade
* Teaching / Instructing / Training ability
* Managing People & resources
* Communications skills-(which will be assessed through your application & interview)

**Please give details below of your relevant experience across the following 3 assessment areas.**

|  |
| --- |
| 1. **Relevant experience and knowledge of the trade** |
|  |
| 1. **Teaching/Instructing/Training experience or ability** |
|  |
| 1. **Managing People & Resources** |
|  |

1. **References**

Please give details of two referees, one which must be your current or last employer (other than relatives or friends). Referees will only be contacted where applicants are in consideration for an appointment. Any appointment will be subject to receipt of satisfactory references.

|  |  |
| --- | --- |
| **Referee No. 1** | **Referee No.2** |
| Name:  Relationship to you:  Position:  Address:  Contact Phone:  Contact email: | Name:  Relationship to you:  Position:  Address:  Contact Phone:  Contact email: |

1. **ADDITIONAL INFORMATION**

**TRAINING QUALIFICATIONS**

Do you hold a training qualification Yes   No\*

**(all applicants taking up a post who do not hold a formal qualification will be required to undergo an accredited training delivery course as part of the induction process)**

**PERIOD OF NOTICE**

How soon after an offer of appointment would you be able to take up employment?

**ADVERTISING**

Where did you see this position advertised?

**DECLARATION AND SIGNATURE**

* You are required to sign the declaration below certifying that all information you have provided is accurate.
* Providing incorrect information or deliberately concealing any relevant facts may result in disqualification from the selection process or, where discovery is made after an appointment, in summary dismissal.

I declare that the information supplied in this application form is accurate and true.

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Completed application forms should be emailed to recruitment@lcetb.ieno later than **closing time and date of 12noon, Thursday 13th March, 2025**