

APPLICATION FORM Solace Café Peer Connector

REFERENCE NUMBER:			
SECT	ION 1		
PERSONAL DETAILS, EDUCATION AND EXPERIENCE			
1.1. PERSONAL DETAILS			
First Name:			
Last Name:			
Postal Address for Correspondence:			
Mobile Telephone (mandatory):			
Contact Telephone No. 2:			
Email Address (mandatory):			
You may provide more than one)			

1.2 RELEVANT EDUCATION AND TRAINING HISTORY

Duration of	College / Educational	Name of Course	Level of Award on	Any major
Award	Institution		the NFQ	speciality
From –			Framework	option (if
To (00/00)			maintained by QQI	applicable)
			http://www.nfq-	
			<u>qqi.com/</u>	

1.3 CURRENT OR MOST RECENT EMPLOYMENT

Please ensure your full 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).

From	То	Title	Employer

		SECTI	ON 2		
In pa	SKILLS, COMPETENCIES AND / OR KNOWLEDGE This section will be assessed to consider your experience as it is relevant to the eligibility criteria. Information you provide in this section and in other areas of the application form may be used as part of a short listing exercise and may be discussed in more depth at interview, should you be called to one.				
	 Please provide clear, detailed answer(s) that demonstrate the depth and breadth of your professional and/or personal experience in the area(s) below, reflective of the requirements of this post. 				
• Each section below must be completed. As you complete each section, we recognise there will be an overlap in the employer and date periods.					
 We would like to highlight to you that if you omit information in this section pertinent to the eligibility criteria your application will be deemed ineligible, and you will subsequently not be called forward to interview. 					
 Please outline your understanding of recovery from a mental health challenge from the perspective of both the individual with the challenge and their family Carer and supporters' perspective. 					

	another individual who has a MH challenge or supports someone who does?
3.	What is your approach to planning and organising and please give an example of a roor situation you perform that demonstrates your planning and organising skills?
4.	Can you describe your knowledge of community supports available to individual recovery and their family and supports in the community? Outline how you ha engaged with these and or have supported others to engage with them?
4.	recovery and their family and supports in the community? Outline how you ha
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6. Please include any additional experience you wish to highlight as it applies to the Principal Duties and Responsibilities as outlined in the Job Description		
SECT	ΓΙΟΝ 3	
3.1. REFEREES		
Please give the details of two referees (one shou	ald be a current or most recent employer). We will	
not contact your referees until after interview process and not without notifying you first.		
Name:	Name:	
Position:	Position:	
Organisation:	Organisation:	
Telephone:	Felephone:	
Email:	Email:	
SECTION 4 4.1 DECLARATION		
4.1 DECLARATION		
I declare that the information set forth in this application form is, to the best of my knowledge, true		
and complete.		
Signed:		
Date:		

HOW TO SUBMIT YOUR APPLICATION

Please send a <u>completed and signed</u> (e-signature accepted) application form by e-mail to <u>recruitment@sligosocialservices.ie</u>.

Closing Date: May 17th at 4.30pm

Solace café is delivered in Sligo by Sligo Social Services and funded by the HSE

