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| **Job Title** | REGIONAL DEVELOPMENT OFFICER – Volunteers and Clubs (Ulster Region) |  | **All application forms should be sent to:**  Email: [SO.HR@specialolympics.ie](mailto:SO.HR@specialolympics.ie)  Or posted to  **PRIVATE & CONFIDENTIAL**  Jessica Cummins  HR Administrator  Special Olympics Ireland  National Sports Campus  Snugborough Road  Blanchardstown  Dublin 15 |
| **Closing Date** | **3rd of February 2017** |  |

N.B. To facilitate photo copying, this form should be completed in **black pen** using block capitals or typewritten.

**Please ensure you read the ‘Information for Applicants’ booklet before filling out this application form.**

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| **SECTION 1 - PERSONAL DETAILS** | | | | | | |
| **Surname:** | |  | **Forename** | | |  |
| **Title** | **,Mrs, Miss, Ms**  **If Other please specify** | | **Email Address** | | |  |
| **Address**  **Postcode** |  | | **Telephone Numbers**  **Home**  **Work**  **Mobile** | | |  |
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|  | |  |
| **NI Number** |  | | **How did you hear about this vacancy?** | | |  |
| **SECTION 2 – REFERENCES** | | | | | | |
| Please state the names of two employment related referees, ***including your current employer.*** | | | | | | |
| **Reference 1** | | | | | | |
| **Name** |  | | | **Address**  **Telephone No.** |  | |
| **Position** |  | | |
| **Reference 2** | | | | | | |
| **Name** |  | | | **Address**  **Telephone No.** |  | |
| **Position** |  | | |
| May Special Olympics Ireland contact your present employer?  \***Any offer of employment will be subject to satisfactory references and Access NI checks**. | | | | | | |

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| **SECTION 3 - QUALIFICATIONS** | | | | | | | | | | | |
| Give details of your qualifications, i.e. GCSE, A-Levels, GNVQ’s, Degree (please ensure you include the result/grade) | | | | | | | | | | | |
| **Type of Qualifications e.g. GCSE, NVQ, A-Level, degree** | | | **Subjects** | | | | **Date Achieved** | | | **Result / Grade** |
|  | | |  | | | |  | | |  |
| Membership of Professional Associations:  (including dates of membership) | | | |  | | | | | | |
| **SECTION 4 - EMPLOYMENT HISTORY** | | | | | | | | | | | |
| **Current / Most Recent Employment** | | | | | **Name & Address of Employer** | | |  | | |
| **Date Appointed** |  | | | |  | | |
| **Date Left** *if applicable* |  | | | |  | | |
| **Notice Period** |  | | | | **Job Title** | | |  | | |
| **Main duties and areas of responsibility** | | | | | | | | | | |
| **Salary (per annum)** | |  | | | | **Reason for Leaving** | | |  | |

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| **Please detail the last eight years of your employment history starting with the most recent.** | | | | |
| **Dates of employment**  **(From & To)** | **Name and Address of Employer** | **Position held & Main Duties** | **Leaving Salary** | **Reason for Leaving** |
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| **SECTION 5 - SIFTING INFORMATION** | | | | | |
| The following sections ask you to outline your qualifications and experience in relation to the essential and desirable criteria specified in the Personnel Specification. **It is not acceptable to simply restate the criteria. E.g. “I have experience in using Microsoft Office”. Applicants must clearly demonstrate experience giving examples**. | | | | | |
| **DESIRABLE CRITERIA** | | | | | |
| Qualifications and Attainments Please provide information of how your qualifications meet the minimum requirement of \* *A degree in sports management or sports development, sport/leisure management, health/ leisure studies that can be proven to relevant to the position.* | | | | | |
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| ESSENTIAL CRITERIA |
| Relevant ExperiencePlease provide information using examples to demonstrate how your experience to date meets the criteria of  * **•Essential: *\*****Minimum of one year’s experience organising in a coordinating role in a multi-faceted project.* |
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| ESSENTIAL CRITERIA |
| Relevant ExperiencePlease provide information using examples to demonstrate how your experience to date meets the criteria of  * **•Essential:** *\*An understanding of principles of volunteer management* |
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| ESSENTIAL CRITERIA |
| Relevant ExperiencePlease provide information using examples to demonstrate how your experience to date meets the criteria of **•Essential: *\**** *Excellent people-management and motivational skills, leadership qualities and strong interpersonal skills* |
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| ESSENTIAL CRITERIA |
| Relevant ExperiencePlease provide information using examples to demonstrate how your experience to date meets the criteria of **•Essential:** *\* Ability to develop and mentor volunteers, Ability to develop & manage a project plan to achieve organisation’s goals and Ability to prioritise in order to meet deadlines and timescales* |
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| OTHER REQUIREMENTS | | |
| Please tick the appropriate box | **YES** | **NO** |
| I have access to a form of transport that enables me to meet the requirements of the post in full |  |  |
| * I am prepared to travel frequently as part of the role |  |  |
| * I am able to meet a requirement to work flexible hours including occasional evenings and weekends |  |  |
| * I am agreeable to undergoing a vetting process, which will involve  1. If resident in Northern Ireland, complete and submit a Disclosure Certificate Application Form for Access NI. 2. If resident in the Republic of Ireland, complete and submit a Garda Vetting Application Form. (See attached information on Enhanced Disclosures) |  |  |

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| **SECTION 6 - DECLARATION AND SIGNATURE** |
| The statements given by me on this application are to the best of my knowledge and belief true. I understand that deliberate falsification of factual information may prejudice my application or lead to an offer of appointment being withdrawn.  **Signature: Date:** |
| The completed form should be sent to the following:  Jessica Cummins at [SO.HR@specialolympics.ie](mailto:SO.HR@specialolympics.ie)  Or posted to:  **PRIVATE & CONFIDENTIAL**  Jessica Cummins  HR Administrator  Special Olympics Ireland  National Sports Campus  Snugborough Road  Blanchardstown  Dublin 15 |

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| **SECTION 7 - EQUAL OPPORTUNITIES MONITORING** |
| **FAIR EMPLOYMENT (NI) ACT 1989 AND FAIR EMPLOYMENT**  **(MONITORING) REGULATIONS 1989**  Special Olympics Ireland is committed to promoting equality and diversity. It is our policy to provide employment equality to all, irrespective of gender, including gender reassignment, martial or civil partnership status, having or not having dependants, religious belief or political opinion, race, disability, sexual orientation and age.  We are opposed to all form of unlawful and unfair discrimination. All job applicants, employees and others who work for us will be treated fairly and will not be discriminated against on any of the above grounds. Decisions about recruitment and selection, promotion, training or any other benefit will be made objectively. As an equal opportunities employer we want to ensure that all of our applicants and employees enjoy equality of opportunity. We also want to encourage the best people to apply for vacancies in our company regardless of their background.  The information provided on the monitoring questionnaire will only be made available to the monitoring officer. If you provide us with information in respect of a disability we will use this information to ensure that we meet our legal obligation to make reasonable adjustments. If we make equal opportunities information public, this will be done in a way that ensures anonymity.  To ensure confidentiality, the questionnaire will be given an identifying number and only the monitoring officer will be able to match this number with your name. Your name should not be written on the questionnaire. The monitoring information collected will be used to measure the effectiveness of our equal opportunities policy, determine the extent to which we promote equality of opportunity and fair participation and will assist us to develop and review positive/affirmative action policies.  Special Olympics Ireland is committed to updating relevant monitoring data every three years. This is because we recognise that individuals may for example, acquire disabilities, change their marital status etc. If the monitoring information you provide us with changes please let us know.  If you have any queries about this form please contact  Jessica Cummins: [SO.HR@specialolympics.ie](mailto:SO.HR@specialolympics.ie) |

**Special Olympics Ireland**

**EQUAL OPPORTUNITIES MONITORING FORM**

**CONFIDENTIAL**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **Monitoring Reference Number: 01RDO/17** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| We wish to assure applicants and employees that the monitoring data they provide will be used to promote equality of opportunity for all applicants and employees regardless of their background. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Ethnic Group:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Please indicate which Ethnic Group you belong to: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Bangladeshi | | | |  | |  | | | | | | | | Indian | | | | | | | | | |  | | | | | | |  | |
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| Black African | | | |  | |  | | | | | | | | Irish Traveller | | | | | | | | | |  | | | | | | |  | |
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| Black Caribbean | | | |  | |  | | | | | | | | Pakistani | | | | | | | | | |  | | | | | | |  | |
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| Black Other | | | |  | |  | | | | | | | | White | | | | | | | | | |  | | | | | | |  | |
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| Chinese | | | |  | | Any other ethnic group: | | | | | | | | | | | | | | | | | | | | | | |  | | |  |
|  | | | |  | |  | | | | | | | | |  | | | | | | | | | | | | | |  | | | |
| My Nationality is: | | | | |  | | | | | | | | | | | | | | | | | | | |  | | | | | | | |
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| In asking this question, we want to assure applicants that the information provided will only be used to promote equality of opportunity for applicants and employees in the basis of their Nationality. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Sexual Orientation:** | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| My sexual orientation is towards someone: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Of the same sex | | | | |  | | | A different sex | | | | | | | | | |  | | | | |  | | | | | | | | | |
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| Both | | | | |  | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
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| Are you in a civil partnership? | | | | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | |
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| **Disability:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Under the Disability Discrimination Act 1995 a person is considered to have a disability if he/she has a physical or mental impairment which has a substantial and long-term adverse effect on his/her ability to carry out normal day to day activities. Please note that it is the effect of the impairment, without treatment, which determines if an individual meets this definition of disability. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Do you consider that you meet this definition of disability? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Yes | |  |  | | | | | No | | | |  | | | |  | | | | | | | | | | | | | | | | |
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| If yes, please state the type of disability: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Mental Health Disability | | | | | | |  | | | |  | | | | | | | | | | | | | | | | | | | | | |
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| Learning Disability | | | | | | |  | | | |  | | | | | | | | | | | | | | | | | | | | | |
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| Physical Disability | | | | | | |  | | | |  | | | | | | | | | | | | | | | | | | | | | |
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| Are there reasonable adjustments that we could make as part of our recruitment process that would enable you to enjoy equality of opportunity in getting a job/working with us? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Please specify: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Marital Status / Family Status:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Are you married? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Yes | |  |  | | | | | No | | | |  | | | |  | | | | | | | | | | | | | | | | |
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| **Those With and Without Dependants:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Do you have:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Children | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
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| If YES, are they at school | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
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| Other relations, for whom you have  significant caring responsibilities | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
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| Other caring responsibilities | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
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| Please specify: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |
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| No caring responsibilities | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
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| **Community Background:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Regardless of whether we practice religion most of us in Northern Ireland are seen as either Catholic or Protestant. Please indicate the community to which you belong by ticking the appropriate box below: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| I am a member of the Protestant community | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | |
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| I am a member of the Roman Catholic community | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | |
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| I am a member of neither the Protestant nor Roman Catholic community | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | |
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| Please indicate your sex by ticking the appropriate box | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | |
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| Male | |  |  | | | | | | Female | | | | | | | | | | |  | | | | | |  | | | | | | |
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| **Age:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Please provide your date of birth or tick the Age band to which you belong: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| DOB: |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |
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| **Age Band:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Under 18** | | |  | | |  | | | | | | **41 - 50** | | | | | | | | |  | | | | | |  | | | | | |
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| **18 - 30** | | |  | | |  | | | | | | **51 - 60** | | | | | | | | |  | | | | | |  | | | | | |
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| **31 – 40** | | |  | | |  | | | | | | | **61 and over** | | | | | | | |  | | | | | | |  | | | | |
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**Information on the Rehabilitation of Offenders (NI) Order 1978**

The Rehabilitation of Offenders (Exceptions) Order (NI) 1979 (Amended by 1987, 2001, 2003, 2014 Orders) provides spent and unspent convictions.

A range of occupations are exempted from the legislation for these posts, applicants MUST disclose information on both ‘spent’ AND ‘unspent’ convictions. Special Olympics Ireland falls within this range of occupations as defined below in the Order:

WORK THAT INVOLVES CONTACT WITH CHILDREN OR YOUNG PROPLE OR VULNERABLE ADULT GROUPS – e.g. provision of health care or social services, work with children such as youth work, education, or with adults with learning disabilities, mental illness, the elderly.

**Enhanced Disclosure (Northern Ireland)**

In addition, under the Safeguarding of Vulnerable Groups (NI) Order 2007, Special Olympics Ireland is eligible to request an Enhanced Disclosure through AccessNI in Northern Ireland as volunteer roles require working with children or vulnerable adults.

An Enhanced Disclosure may contain details of any spent and unspent convictions as well as cautions, informed warnings where such information is held on the Police National Computer. It may also have relevant non-conviction information from police records. It may also have information from the Independent Safeguarding Authority if the applicant volunteer is prevented from working with children of vulnerable adults. All applicants for volunteer roles with Special Olympics Ireland will be subject to a request for an Enhanced Disclosure through Access NI.

**Serious offences**

Special Olympics Ireland considers serious offences to include, but not be limited to:

* Offences of a sexual nature
* Violent offences
* Drugs offences

Offences of a sexual nature and/or Gross Bodily Harm will automatically prohibit an applicant from being successfully recruited as a volunteer.

For confidential advice or information please contact NIACRO’s Employment Advice Line on:

028 9032 0157.

**DISCLOSURE OF CRIMINAL CONVICTIONS**

APPLICANT: \_\_     \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ POST:\_\_     \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please read this information carefully**

Statement of non-discrimination

Special Olympics Ireland is committed to equality of opportunity for all applicants including those with criminal convictions. Information about criminal convictions is requested to assist the selection process and will be taken into account only when the conviction is considered relevant to the role’. Any disclosure will be seen in the context of the job description, the nature of the offence and the responsibility for the care of existing athletes/volunteers and employees.

Question

Below you are asked to disclose any criminal convictions

Having a criminal record will not necessarily debar an applicant from employment with Special Olympics Ireland. This will depend on the circumstances and background of the offence(s) or other information contained on the Disclosures or provided directly to us by the police.

Advice to Applicants

Please complete this disclosure form as accurately as possible and place in the ‘Confidential’ envelope provided along with your monitoring form, seal it and return it to the Monitoring Officer with your application form. The information provided will not be discussed at the shortlisting or interview itself and a separate arrangement will be made with you if clarification is required to discuss any issues around your disclosure before a final decision is reached.

If you have no convictions, please state NONE.

|  |
| --- |
| DATE OF CONVICTION OFFENCE SENTENCE |
|  |

Please provide any other information you feel may be of relevance such as:

* The circumstances of the offence
* A comment on the sentence received
* Any relevant development in your situation since then
* Whether or not your feel the conviction has relevance to this post.

|  |
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|  |

Please continue on a separate sheet if necessary

I declare that any answers are complete and correct to the best of my knowledge.

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