

### APPLICATION FORM

**Senior Psychologist – 12 Months Specified Purpose Contract**

Please carefully note the following instructions:

# Please download, save and read the ‘Job Specification’ which provides the necessary information about the requirements of this post.

# 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.

* Application Forms must be typed.
* Applications must be submitted as a Microsoft Word or PDF document format only. Applications stored on personal online storage sites, e.g. OneDrive, 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 online storage site e.g. Google Drive) when emailing your application.
* In relation to details of employment, if the space provided is insufficient, please attach additional pages ensuring to use the same format.
* Should you be invited for interview, you may take a 'hard' copy (or 'paper' copy) of your application form with you. Mobile devices are not permitted for use during your interview.
* Nasc is an Equal Opportunities Employer.
* Nasc recognises its responsibilities under the Data Protection Acts 1988 and 2003 and the Freedom of Information Act 2014.
* This post is funded by HSE Cork Kerry Community Healthcare

***Please return completed application form to: (insert details below)***

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| --- | --- |
| **E-mail:**  **fiona@nascireland.org** | |
| **Closing date for applications:** | **21 May 2021 at 5.00 pm.** |
|  | |

Applicant Details:

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| --- | --- |
| Candidate Reference No *(office use only)* |  |
| **Personal Details:** |  |  |  |
| First Name : |  |
|  |  |  |  |
| Last Name: |  |
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| Postal address for correspondence: |  |
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| **MOBILE TELEPHONE *(mandatory)***: |  |
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| Contact Tel No. 2: |  |
| **E-mail Address** ***(mandatory)***:  ***(You may provide more than one)*** |  |
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| Drivers Licence *(please state type & category):* |  |

**European Economic Area**

Are you an EEA (European Economic Area) National? Yes  / No

**NB If you are a non EEA citizen you must provide the requested documentation to support your application**

**EDUCATIONAL ACHIEVEMENTS**

**Please include second level and any (additional) third level educational achievements:**

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| --- | --- | --- | --- | --- | --- |
| **Dates**  **From / To** | **Educational Institution** | **Conferring**  **Body** | **Course of Study** | **Qualification Achieved** | **Grades Achieved** |
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**CAREER OVERVIEW**

**IMPORTANT: 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).**

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| **From** | **To** | **Title** | **Employer** |
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**Detailed Career History- please begin by listing the most recent first:**

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| --- | --- |
| **Job Title:**  **Grade/ Management Level *(if applicable):*** | |
| **Employer(s) & Department Name:** | |
| **From (00/00):** | **To(00/00):** |
| Main Roles & Responsibilities: | |

|  |  |
| --- | --- |
| **Job Title:**  **Grade/ Management Level *(if applicable):*** | |
| **Employer(s) & Department Name:** | |
| **From (00/00):** | **To(00/00):** |
| Main Roles & Responsibilities: | |

|  |  |
| --- | --- |
| **Job Title:**  **Grade/ Management Level *(if applicable):*** | |
| **Employer(s) & Department Name:** | |
| **From (00/00):** | **To(00/00):** |
| Main Roles & Responsibilities: | |

|  |  |
| --- | --- |
| **Job Title:**  **Grade/ Management Level *(if applicable):*** | |
| **Employer(s) & Department Name:** | |
| **From (00/00):** | **To(00/00):** |
| Main Roles & Responsibilities: | |

|  |  |
| --- | --- |
| **Job Title:**  **Grade/ Management Level *(if applicable):*** | |
| **Employer(s) & Department Name:** | |
| **From (00/00):** | **To(00/00):** |
| Main Roles & Responsibilities: | |

**Candidate Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Candidate Reference No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ELIGIBILITY CRITERIA**

**Eligible applicants will be those who on the closing date for the competition have:**

**Eligibility Criteria**

**(i) A recognised University degree or diploma (NQAI Level 8 equivalent) obtained with first or**

**second class honours in which psychology was taken as a major subject and honours obtained in**

**that subject**

**And**

**(ii) A postgraduate professional psychological qualification recognised by the Psychological Society**

**of Ireland in Clinical Psychology, or Counselling Psychology or Educational Psychology as**

**appropriate to the area of professional psychology in which the position is designated**

**Or**

**A postgraduate professional psychology qualification validated by the Department of Health and**

**Children in Clinical Psychology or Counselling Psychology or Educational Psychology as**

**appropriate to the area of professional psychology in which the position is designated**

**and**

**(iii) have at least five years’ satisfactory postgraduate experience in the area of professional**

**psychology in which the position is designated.**

**The five years’ experience must comprise of no more than three years full-time Post Graduate**

**training and no less than two full years’ experience as a Staff Grade Psychologist. Years in excess**

**of the permitted three years for completion of the Post Graduate training or time not worked cannot be taken into consideration when assessing the five years’ experience requirement.**

Please detail below (in months) your experience to date that demonstrates your fulfilling of the above eligibility criteria. **Please note that the information supplied here will be used to determine your eligibility for this campaign.**

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| **From Date 00/00/00** | **To Date**  **00/00/00** | **Total Months** | **Employer** | **Title of Post** | **Grade** |
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| **Total Cumulative Months** | | |  | | |

**POST SPECIFIC REQUIREMENTS**

**Please indicate below how your professional experience meets the post specific requirements for the post of Senior Psychologist.**

**This section will be assessed by a board of Senior Managers to consider your experience as it is relevant to the post specific requirements**

* **Please note that if you omit information in this section pertinent to the post specific requirements you may be deemed ineligible and subsequently not called forward to interview.**
* **Short-listing may occur based on the information provided here and in the other areas of this application form.**
* **Please complete each section below. As you complete each section we recognize there will be overlap in the employer and date periods.**

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| **Capacity to assess and treat a wide range of clinical presentations in the context of cultural differences, language barriers and other barriers to service access and delivery.** | |
| **Date(s) from – Date(s) to** | **Employer(s) & Department Name** |
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| **Experience in working with ethnic minority communities** | |
| **Date(s) from – Date(s) to** | **Employer(s) & Department Name** |
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| **Demonstrable understanding of / experience in health and psychological needs of minority/vulnerable groups and the unique barriers faced in access to mainstream services** | |
| **Date(s) from – Date(s) to** | **Employer(s) & Department Name** |
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**References:**

Please give **three** referees (including your current employer). Please ensure that the referees you provide are from a professional perspective -. We retain the right to contact all previous employers. Do you wish us to contact you prior to contacting your referees?

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| Yes: |  | No: |  |

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| **1. Name and Job Title of Referee:** | |  | |
| **Dates: From/To (00/00/00)** | |
| Professional Relationship to candidate: | |  | |
| Postal Address: | |  | |
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|  | |
| Telephone Contact Details: | | Mobile: | Landline: |
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| Email Address: |  | | |

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| **2. Name and Job Title of Referee:** | |  | |
| **Dates: From/To (00/00/00)** | |  | |
| Professional Relationship to candidate: | |  | |
| Postal Address: | |  | |
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| Telephone Contact Details: | | Mobile: | Landline: |
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| Email Address: |  | | |
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| **3. Name and Job Title of Referee:** |  | |
| **Dates: From/To (00/00/00)** |  | |
| Professional Relationship to candidate: |  | |
| Postal Address: |  | |
|  | |
|  | |
| Telephone Contact Details: | Mobile: | Landline: |
|  | | |
| Email Address: |  | |

**Candidate Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Candidate Reference No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**General 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.

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.

In addition, where a person found guilty of an offence was or is a candidate at a recruitment / selection process,

* 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 Nasc to the making of such enquiries, deemed necessary by Nasc in respect of my suitability for the post in respect of which this application is made.

I hereby accept and confirm the entitlement of Nasc 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 Nasc with any information relevant to my application or to my continued employment with NASC or where I have made any false statement or misrepresentation relevant to this application or my continuing employment with Nasc .

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:** \_\_\_\_\_\_\_\_\_\_

* + 1. **APPLICANT CHECKLIST**

If all required details / documentation (as below) 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.

|  |  |  |
| --- | --- | --- |
| Mobile Telephone Number  Email Address  Postal Address |  | **Mandatory** |
| That the information you have provided in the Eligibility Criteria / Post Specific Requirements Sections clearly show how your qualifications/experience match the requirements. Dates should be clearly indicated i.e. DD/MM/YY, qualification titles, etc. |  |
| Work Permit Documentation (if relevant to non-EEA applicants). |  |
| Application is submitted by the closing date and time and that you have used the campaign reference in the subject line of your email. |  |
| That you have downloaded and saved the Job Specification for future reference. | | |

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)