**WEXFORD COUNTY COUNCIL**

**Application for position of**

**GENERAL OPERATIVE**

**Closing date for receipt of applications is 5.00 pm on Thursday, 6th March, 2025**

Please indicate Area(s) that you wish to apply for:

Enniscorthy Gorey/Kilmuckridge New Ross Wexford Rosslare

Please refer to the qualifications before completing this section:

Candidates may apply to be included on either Panel A, (Confined Panel) or Panel B, (Open Panel) or Both. Please indicate below which Panel(s) you wish to apply for:-

Panel A: Confined Panel Panel B: Open Panel Both:

(To apply for inclusion on Panel A, candidates must be currently employed by Wexford County Council and have satisfactory experience, such candidates may apply for inclusion on Panel B also).

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: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**A valid email address must be provided for future correspondence relating to this competition**

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

Please ensure that you have supplied sufficient information to support this claim. Persons who are ineligible but nevertheless apply put themselves to unnecessary expense.

**6.** Please state where you heard about the post: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

You must ensure that all sections of this application form are completed in full. As candidates may be shortlisted on the basis of information supplied in this application form, you should ensure that the information provided is sufficiently comprehensive.

**7**. **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 from your present or previous employers? Yes: No:

**8. GENERAL EDUCATION:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **School or College Attended** | **From** | **To** | **Examination** | **Results** |
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9. ACADEMIC AND/OR PROFESSIONAL QUALIFICATIONS:

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| --- | --- | --- | --- | --- |
| **Full title Degree(s)/**  **Qualification(s) held** | **Type & Grade of**  **Hons (1st or 2nd Class, Gr I or II)** | **Subject(s) in final exam** | **University, College or Examining Authority** | **Course**  **Duration**  **& Year Qualification**  **Obtained** |
| Level (6,7,8 etc.): \_\_\_\_\_\_\_ |  |  |  | Course Duration (yrs)  \_\_\_\_\_\_\_\_\_\_\_\_\_  Year Qualification obtained  \_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Level (6,7,8 etc.): \_\_\_\_\_\_\_ |  |  |  | Course Duration (yrs)  \_\_\_\_\_\_\_\_\_\_\_\_\_  Year Qualification obtained  \_\_\_\_\_\_\_\_\_\_\_\_\_ |

**10. CURRENT FULL CLEAN DRIVING LICENCE HELD:**

**YES: NO:**

|  |  |  |
| --- | --- | --- |
| **Licence Number** | **Class (A, B, C, D etc.)** | **Expiry Date** |
|  |  |  |

**11. SAFE PASS HELD:**

**YES: NO:**

|  |  |
| --- | --- |
| **Registration Card Number** | **Expiry Date** |
|  |  |

**Candidates must enter details of their Driving Licence and Safe Pass Card as requested above**

**12. TRAINING COURSES UNDERTAKEN**

Please provide details of any relevant courses or training you have received (for example chain saw, CSCS Teleporter, Cherry Picker, location of underground services, paving/ke

rb laying or CSCS signing, lighting and guarding at road works) other courses include, Occupational First Aid, Manual Handling, Computer Skills, ECDL etc.

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of Course and Duration of Course** | **Year Received** | **Type (e.g. Construction Skills Certification Scheme (CSCS) or internal company or other** | **Card/Certificate Reference Number**  **(if applicable)** |
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**13. EMPLOYMENT HISTORY**

Please give below, in date order, full particulars of all employment (including also any periods of unemployment) between the date of leaving school and the present date. No period between these dates should be unaccounted for.

|  |  |  |  |
| --- | --- | --- | --- |
| **NAME AND ADDRESS**  **OF EMPLOYER** | **POSITION HELD/MAIN DUTIES & RESPONSIBILITY**  **(Please indicate if Permanent or Contract)** | **Date From**  **(Mth/Yr)** | **Date To**  **(Mth/Yr)** |
|  |  |  |  |
|  |  |  |  |

**13. EMPLOYMENT HISTORY (CONTD)**

**NAME IN FULL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| **NAME AND ADDRESS**  **OF EMPLOYER** | **POSITION HELD/MAIN DUTIES & RESPONSIBILITY**  **(Please indicate if Permanent or Contract)** | **Date From**  **(Mth/Yr)** | **Date To**  **(Mth/Yr)** |
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**13. EMPLOYMENT HISTORY (CONTD)**

**NAME IN FULL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| **NAME AND ADDRESS**  **OF EMPLOYER** | **POSITION HELD/MAIN DUTIES & RESPONSIBILITY**  **(Please indicate if Permanent or Contract)** | **Date From**  **(Mth/Yr)** | **Date To**  **(Mth/Yr)** |
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**13. EMPLOYMENT HISTORY (CONTD)**

**NAME IN FULL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| --- | --- | --- | --- |
| **NAME AND ADDRESS**  **OF EMPLOYER** | **POSITION HELD/MAIN DUTIES & RESPONSIBILITY**  **(Please indicate if Permanent or Contract)** | **Date From**  **(Mth/Yr)** | **Date To**  **(Mth/Yr)** |
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| **Supplementary Information for post of General Operative** | | | |

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| In relation to the employment record you have supplied, please give details (including dates) of **your experience in the following areas**.  You should ensure that the example(s) you use is/are from a recent period in your employment that you feel most equips you for this position. |

**1. Experience of Road Maintenance Work:**

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| You should include the following: -   1. Types of Road Maintenance (e.g. drainage, road repairs, minor construction work, pipe laying, fencing etc.) you have worked on. 2. Duration and dates you worked on these. |
|  |

**2. Experience of General Maintenance:**

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| You should include the following: -   1. Labouring, trade experience, ground works, concrete works, landscaping, street cleaning, grass cutting etc. 2. Duration and dates you worked on these. |
|  |

**3. Experience of Driving:**

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| You should include the following: -   1. All vehicle driving experience 2. Duration and dates of driving experience |
|  |

**4. Experience of Operating Machinery, Tools and Equipment:**

(e.g. teleporters, cherry pickers, excavators, tractors, trucks, chainsaw, lawn mowers, strimmers, operation of temporary traffic management (CSCS signing, lighting, guarding) etc.

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| You should include the following: -   1. Types of Machinery, Tools and Equipment used in previous employment 2. Duration and dates of driving experience   *Please ensure all qualifications for operating machinery, tools or equipment are included in the section “Education and Training”* |
|  |

**5. Experience of Health & Safety:**

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| You should include any duties performed that comply with Health & Safety requirements for example the use of PPE (personal protective equipment) etc.  *Please ensure all qualifications for operating machinery, tools or equipment are included in the section “Education and Training”* |
|  |

**6. Experience in dealing with the public and working as part of a team:**

|  |
| --- |
| You should include dealing with public queries, Health & Safety of the public when working in a public place and a time when working as part of a team. |
|  |

**Additional Information:**

Please indicate the particular qualities or experience you possess that will enable you to contribute to the work of the Council in this position (e.g. Community Projects, Job Initiative Schemes etc.)

|  |
| --- |
| **Answer:** |

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

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**If offered appointment when could you take up duty?** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DECLARATION AND DATA PROTECTION**

All personal information provided on this application form will be stored securely by Wexford County Council and will be used for the purposes of the recruitment process. Application forms will be retained for a period of 18 months from closing date of campaign in the case of ineligible applicants or those who do not qualify for inclusion on a panel. In the case of an applicant placed on a panel information is retained for a period of 18 months from the expiration of the panel and in the case of a successful candidate, for the duration of employment and a minimum of one year thereafter. This information may be disclosed to a third party, solely connected with assisting the Council with the recruitment and selection purposes and HR related functions, and where necessary to comply with statutory requirements or seeking references. We assure applicants that information provided will only be used for the purposes for which it has been submitted. For further information please see the Wexford County Councils Data Protection Policy Section on our website [www.wexfordcoco.ie](http://www.wexfordcoco.ie)

I declare that I have read the relevant recruitment material and fulfill all requirements set out in the Candidate Information Booklet.

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

**Note to candidates:**

###### Four completed application forms (Original form plus 3 copies) must be forwarded to The Human Resources Officer, Wexford County Council, Carricklawn, Wexford, no later than 5.00 p.m. on Thursday, 6th March, 2025.

* Please do **not** include a CV.
* Do not forward any certificates or references with this form, unless requested to do so.

###### Application forms received after closing time & date will not be considered.

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