

Standard Application Form (SAF)

Name:

Position Applied For: Post-Doctoral Researcher

Job Reference No: 99961/23

Closing Date: Sunday, 26th February 2023

**** Applications must be received no later than 23:30 on the date of Closing.**

How to Apply:

Complete this Application Form in full, clearly indicating the job reference number and return by email or post (details below) to the **Human Resources Directorate** no later than 11.30pm on closing date stated above. Please ensure that you include details of a current daytime contact number and/or e-mail address on your application.

To apply by email, for **nursing positions** send to nursejobs@stjames.ie and for any **other positions** please send to careers@stjames.ie. For postal applications, send to Human Resources Directorate, Hospital 1, Top Floor, St. James's Hospital, James's Street, Dublin 8.

Applications must be submitted in TYPED format, or written clearly in BLOCK CAPITALS using Black Ink only.

Submission of a "CURRICULUM VITAE" will NOT BE ACCEPTED

St James's Hospital is an Equal Opportunities Employer and welcomes applications from all sections of the community regardless of gender, age, race, religion, civil status, sexual orientation, disability, membership of the travelling community, or family status.

Should you have any difficulty in completing this application form, please contact Human Resources Directorate, St. James's Hospital, Dublin 8, Tel: 00 353 1 4162559, Email: nursejobs@stjames.ie or careers@stjames.ie so that we can assist you.

The information which you give on this form will be treated as strictly confidential and all or part may be retained in a computerised system, in which case the Hospital will comply fully with the requirements of the Data Protection Act.

Thank you for your interest in St. James's Hospital.

PRIVATE AND CONFIDENTIAL

Position Details:

(Please use block capitals)

Position Applied For:

Job Reference Number:

Where did you see this position advertised?

Personal Details:

Title:

Forename:

Surname:

Address:

Contact Number: - (Mobile): (Other):

Email Address:

- (Please note the email address provided by you will be used for regular correspondence relating to your application).

Questionnaire Section:

Do you require a Work Permit / Visa to work in Ireland? Yes ___ / No ___

If yes, do you currently hold a valid Work Permit / Visa to work in Ireland? Yes ___ / No ___

WORK PERMIT / VISA TYPE: _____ EXPIRY DATE: _____

(Nursing Applicants Only)

Have you completed the **Occupational English Test (OET)** or **International English Language Testing System (IELTS)** academic test? Yes ___ / No ___

If yes, what overall score did you achieve? Score: _____

What date did you complete the test on? Test Date: _____

Important: Please attach a copy of your OET or IELTS results with your completed application form.

Nursing Midwifery Board of Ireland (NMBI)

Are you registered with The **Nursing Midwifery Board of Ireland**? Yes ___ / No ___

NMBI PIN NUMBER: _____

Alternatively, have you been issued with a recent “Decision Letter” from NMBI to undertake a period of adaptation? Yes ___ / No ___

Important: Please attach a copy of your “Decision Letter” with your completed application form.

Details of Current Employment:

Current Employer & Address	
Position Held	
Start Date	
Description of Duties/Areas worked:	

Previous Employment Details:

Please include details of all previous employment(s), any training periods completed if appropriate and any periods of unemployment.
(Continue on a separate sheet if necessary)

<i>Employer Name & Address</i>	<i>Position Held</i>	<i>Duties/ Area worked</i>	<i>Start Date / Finish Date</i>	<i>Reason for Leaving</i>

Details of Qualifications / Education / Continued Professional Development:

** Candidates will be required to bring copies of Certificates to Interview

Course Title / Qualification Studied	Name & Address of Institute/College Attended	Duration of Course (weeks/months/years)	Qualification Received / Awarding Body & Graduating Year **

Membership of Professional Registered Bodies:

Professional Body	Grade/Level of Membership	Year Admitted & Expiration Date	Membership/PIN Number

Technical / Clinical Competencies:

Please refer to the Role Profile for details of the Technical and/or Clinical Competencies required as a minimum for this vacancy. In the box(s) provided below, **please provide an example** of your current level of knowledge, skill and/or experience of these Technical and/or Clinical Competencies.

***** Information provided by the candidate in this section will be used for shortlisting to next stage of the recruitment process.***

Technical / Clinical Competency
<p>Knowledge/Skill: Demonstrable experience of quantitative data collection and analysis.</p> <p>Example:</p>

Technical / Clinical Competency
<p>Knowledge/Skill: Demonstrable experience of qualitative data collection and analysis.</p> <p>Example:</p>

Behavioural Competencies:

Please refer to the Role Profile for details of the Behavioural Competencies required as a minimum for this vacancy.

You are not required to include written examples of behavioural competencies on this application form. However, it is important to note that these competencies will be explored and assessed in detail at the Interview stage. You will be expected to provide examples of when you previously demonstrated these competencies. Your example for each competency should include:

- **S**ituation (describe in brief the background to the situation)
- **T**ask (what objective were you trying to achieve)
- **A**ction (what action did you take)
- **R**esult (what was the outcome/result following your action)
- **K**ey Learning (what did you learn)

As a further guide to you, “Descriptors” are listed for each required competency (selected by the Hiring Manager for this post) in the right-hand column of the Role Profile and these should assist you when preparing an example for each behavioural competency.

NOTE: If you have any difficulties/queries relating to the above please contact the Human Resources Directorate for guidance (nursejobs@stjames.ie or careers@stjames.ie)

Reference Details:

Please give details of at least two referees whom we may contact – at least one reference must be from your current manager/employer.

Reference 1:

Referee Full Name	
Position Title	
Company Name & Address	
Contact Details (Phone Number & Email Address)	
Professional Relationship (e.g. Manager / Supervisor / HR)	
Permission to Contact (Please confirm by stating YES or NO)	

Reference 2:

Referee Full Name	
Position Title	
Company Name & Address	
Contact Details (Phone Number & Email Address)	
Professional Relationship (e.g. Manager / Supervisor / HR)	
Permission to Contact (<i>Please confirm by stating YES or NO</i>)	

Additional Information:

Please provide details of any additional relevant achievements, either personal or professional, gained to date:

Details:

Equal Opportunities Monitoring:

St. James's Hospital is an equal opportunities employer and operates a "Positive Towards Disability" approach. Please indicate if you have any special requirements should you be invited to interview:

Details of Special Requirements:

Important – Canvassing

Any canvassing by or on behalf of candidates may result in disqualification and exclusion from the recruitment process.

Declaration:

I 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 will 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 this application if provided in hardcopy format will render it invalid. However, if applying electronically you need to check the box below:**

I confirm that I am in agreement with the statement above

Name of Candidate: (Type in full name if applying by e-mail)

Signature:Date:

**** Once Application Form is completed, please review and ensure all information is correct. Do not change layout or format. However, please review the document for any unnecessary extra pages etc and edit for presentation purposes as appropriate.**

Recruitment Process:

- Applicants will be shortlisted for interview based on information supplied in the application form at the closing date.
- The criteria for short-listing are based on the requirements of the post as outlined in Role Profile under Academic/Professional Qualifications and/or relevant Experience, Technical Competencies and the information supplied in the application form.
- All applications will be responded to in due course.

If you require further information regarding this organisation, or the role for which you are applying, please contact:

Human Resources Directorate, St. James's Hospital, James's Street, Dublin 8.
Tel: 00 353 1 4162559 - Email: nursejobs@stjames.ie or careers@stjames.ie