

SPEECH AND LANGUAGE THERAPIST, STAFF GRADE
 NATIONAL COUNCIL FOR SPECIAL EDUCATION

Section A

APPLICANT'S PERSONAL DETAILS			
Name			
Correspondence Address:		Mobile Phone No	
		Landline No.	
		E-mail Address <i>(Please print clearly if completing in handwritten format)</i>	
Please provide details of your registration with CORU:			
NAMES & CONTACT DETAILS OF REFEREES*			
	REFERENCE 1	REFERENCE 2	
NAME			
ROLE			
ADDRESS			
CONTACT TELEPHONE			
CONTACT EMAIL			
*REFEREES WILL ONLY BE CONTACTED DURING CLEARANCE AND WITH THE CANDIDATES CONSENT			
I HAVE A FULL DRIVERS LICENCE	Yes/ No	I HAVE ACCESS MY OWN TRANSPORTATION	Yes/ No

SECTION B

IF NECESSARY EXPAND THE SECTION OR USE ADDITIONAL PAGES IF COMPLETING IN HANDWRITTEN FORMAT

ACADEMIC, PROFESSIONAL OR TECHNICAL QUALIFICATIONS:

Date obtained and Full Title of Degree(s)/ Qualifications (s) held	Subject (s) taken in final examinations	Grade Obtained (e.g. 1, 2.1, 2.2, Pass, etc)	University, College or Examining Authority

EMPLOYMENT RECORD - MOST RECENT FIRST.

Give below, in date order (starting with your current employer), full particulars of all employment (including any periods of unemployment) between the date of leaving school or college and the present date. No period between these dates should be unaccounted for. The top of the list should be your current, or most recent, employment.

Where the grade status is not given it will be assumed that the post held is a temporary one.

Name & Address of Employer	Title of Post Held P = Permanent, T = Temporary, A = Acting	Dates/ Period in Employment	Description of duties, salary, etc:

SUMMARY OF EXPERIENCE:

PLEASE PROVIDE DETAILS OF YOUR EXPERIENCE WORKING AS A SPEECH AND LANGUAGE THERAPIST

Dates From To	Title of post held, short description of duties, salary etc	Name and address of employer

SECTION C

IF NECESSARY EXPAND THE SECTION OR USE ADDITIONAL PAGES IF COMPLETING IN HANDWRITTEN FORMAT

IN THE FOLLOWING SECTION, WE ASK YOU TO DESCRIBE SOME OF YOUR PERSONAL ACHIEVEMENTS TO DATE THAT DEMONSTRATE CERTAIN SKILLS AND ABILITIES WHICH HAVE BEEN IDENTIFIED AS NECESSARY FOR THIS ROLE.

PLEASE NOTE:

- ALL QUESTIONS MUST BE ANSWERED. (A MAXIMUM OF 400 WORDS PER ANSWER)

QUESTION 1

PLEASE PROVIDE EVIDENCE OF YOUR EXPERIENCE IN THE DEVELOPMENT AND DELIVERY OF PROFESSION-RELATED CPD AND SUPPORTING SCHOOL AND/OR ELC COMMUNITIES:

Question 2

Please provide evidence of your ability to furnish reports or other statistical information to a very high standard:

Question 3

Please provide details of your experience of change management including introducing innovative practice within our discipline:

KEY COMPETENCIES

FOR EACH OF THE COMPETENCY AREAS BELOW, PLEASE PROVIDE AN EXAMPLE WHICH YOU FEEL BEST DEMONSTRATES YOUR CAPACITY IN THE COMPETENCY DESCRIBED. YOU MAY USE THE SAME EXAMPLES ACROSS MORE THAN ONE COMPETENCY AREA SHOULD YOU SO WISH. YOUR EXAMPLES SHOULD SHOW CLEARLY HOW YOU HAVE DEMONSTRATED THE PARTICULAR COMPETENCY. YOU SHOULD BE MINDFUL THAT THE SCALE AND SCOPE OF THE EXAMPLES GIVEN DEMONSTRATE THE COMPETENCY IN QUESTION AND ARE APPROPRIATE TO THE POST.

PLEASE REFER TO THE "KEY COMPETENCIES" SECTION IN THE CANDIDATE INFORMATION BOOKLET FOR FURTHER INFORMATION ON THE COMPETENCIES FOR THIS ROLE. YOU SHOULD ALSO HAVE REGARD TO THE "ENTRY REQUIREMENTS" SECTION OF THE BOOKLET IN CHOOSING YOUR EXAMPLES.

Management & Delivery of Results

Answer:

Analysis & Decision Making

Answer:

Building Relationships & Communication

Answer:

POSITION ADVERTISED: SPEECH AND LANGUAGE THERAPIST, STAFF GRADE

SUPPLEMENTARY INFORMATION

PLEASE GIVE BELOW ANY OTHER RELEVANT INFORMATION IN SUPPORT OF YOUR APPLICATION.

Declaration

I hereby declare that the information given in this form is correct and give my permission for enquiries to be made to establish such matters as age, qualifications, experience and character and for the release by other people or organisations of such information as may be necessary to the NCSE for that purpose. This may include enquiries from past/ present employers. The submission of this application is taken as consent to this.

Name of Applicant:

Signature:

Date