

**ST.JOSEPH'S SPECIAL SCHOOL**

**POST OF BUS ESCORT- APPLICATION FORM**

*(If completing this form by hand, please use a ballpoint pen or black ink)*

**Applicant's  
Name**

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Completed and Signed Application Forms should be returned **by post** to:

<p><b>The Chairperson Board of Management <i>St. Joseph's Special School, Ballytivnan Sligo</i></b></p>
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Or by email to [stjosephsspsligo@gmail.com](mailto:stjosephsspsligo@gmail.com)

to arrive by **5.30 p.m.** on **Closing Date.**

**LATE APPLICATIONS WILL NOT BE CONSIDERED**

<b>For Official Use Only</b>
Received:
Date:
Time:

**PERSONAL DETAILS:**

**1 Name**

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**Home**


**Home Tel. No.**

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**Mobile Phone  
No.**

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**E-Mail Address**


**2 Educational Qualifications - most recent first** (*Include second level e.g. Inter Cert, Junior Cert or equivalent and further education (though not a requirement for this particular post).*)

<b>Qualification</b>	<b>School/College</b>	<b>Results</b>	<b>Year of Award</b>

**Experience of working with Children - most recent first.**

<b>Position</b>	<b>Address</b>	<b>Duties</b>	<b>Date from</b>	<b>Date to</b>

**Experience of working with Children or Adults with Special Needs/Disabilities if any - most recent first.**

<b>Position</b>	<b>Address</b>	<b>Duties</b>	<b>Date from</b>	<b>Date to</b>

**5 Other relevant training courses which would assist you in this role – most recent first: (e.g. First Aid, Manual Handling etc)**


**Other employment experience - most recent first.**

<b>Position</b>	<b>Employer/Project</b>	<b>Duties</b>	<b>Date from</b>	<b>Date to</b>

**7 Please indicate briefly your understanding of the role of a Bus Escort**

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**8 Additional information (*not already mentioned*) in support of your application**

**9 Please give the names of two referees: one should be in a position to comment on your personal characteristics and one should be in a position to comment on your professional life. Referees should not be related to the applicant.**

**(1)  
Name**

**(2)  
Name**

**Address**


**Address**


**Phone Number(s)\***

<b>Work:</b>
<b>Home:</b>
<b>Mobile:</b>

**Phone Number(s)\***

<b>Work:</b>
<b>Home:</b>
<b>Mobile:</b>

*\* As it is probable that referees will have to be contacted outside of school times, it is crucial that phone numbers at which referees can be contacted are given.*

**9 Signature of Applicant**

**Date**

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