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| Donegal Co Co (Brand) F+1 Compressed |
| Temporary Beach Lifeguard Summer Bathing Season **June to September, 2022 & 2023****Application Form****Closing Date: 12 Noon, Monday 07 March 2022**  |
| **Section 1 – Personal Details** |
| **Title:** | **First Name:** | **Surname:** |
|  |  |  |
| **Address – For Correspondence Purposes:** |
|  |
|  |
|  |
|  |
|  |
| **Contact Details:** |
| *Work Phone:* |  | *Extn Number:* |  |
| *Home Phone:* |  | *Mobile Number:* |  |
| *Email Address:* |  |
| ***Note:*** Please ensure that you have read the Information Booklet prior to completing your application.You must ensure that all sections of this application form are completed in full.In the event that short-listing of applicants is required, the Council will examine the application forms and assess them against a set of pre-determined criteria based on the requirements of the position.It is therefore in your own interest to provide a detailed and accurate account of your qualifications/experience on the application form. |

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| **First Name:** |  | **Surname:** |  |

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| **Section 2 – Beach Lifeguard Season** **Please Note: All applicants must complete this section fully:** Please indicate below which Beach Lifeguard Season(s) you wish to apply for by ticking  **YES or NO** as applicable You may apply for more than one Season: **2022 Season:****Yes No****2023 Season:****Yes No** |

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| --- | --- | --- | --- |
| **First Name:** |  | **Surname:** |  |

### Section 3 – Education & Training

Please give details of all education and training undertaken and qualifications obtained, i.e. general education and academic/professional/technical qualifications.

Qualifications: All appointments to the Council are subject to necessary qualification checks. Prior to appointment, the Council may seek from the candidate copies of relevant Qualifications required for eligibility for this position.

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| **Qualification** *(e.g. Degree, Diploma, Cert etc)***Duration of course** **Year obtained** | **Grade obtained** *(e.g. 1, 2.1, 2.2, Pass, Higher Level, Ordinary Level, A1, A2, B1 etc.)* | **Subjects taken in final examination** | **University, College or Awarding Body** |
|  |  |  |  |
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| **First Name:** |  | **Surname:** |  |

### Section 4 – Beach Lifeguard Qualifications Details

Candidates must hold a current National Beach Lifeguard Award or equivalent. Please submit original certificate along with application.

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| **3.1** | **Do you currently hold a Beach Lifeguard Certificate? (Please tick)***If yes, please submit original certificate by post* | **Yes** | **No** |
|  |  |
| **3.2** | **If you do not hold a current Beach Lifeguard Certificate, please confirm:** |
| Date which you are undertaking the course, or |  |
| Date on which the Cert is being re-validated |  |

### Section 5 – Other Related Qualifications

Please confirm if you hold any of the following qualification and provide copies of certificates, where appropriate:

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Award** | **Awarding Body** | **Date Awarded** |
| **4.1** | Occupational First Aid / First Aid Responder |  |  |
| **4.2** | Cardiac First Responder |  |  |
| **4.3** | Manual Handling |  |  |
| **4.4** | Other |  |  |

### Section 6 – Health

**Please note candidates will also be required to complete a Health Self Declaration form before any appointment is made.**

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| --- | --- | --- |
| **5.1** | **Are you in a good state of general health and fitness?**  |  |
| If not, please give brief details below: |
| **5.2** | **Is your colour vision normal?** |  |
| If not, please give brief details below: |
| **5.3** | **Is your eyesight normal without contact lenses or glasses?**  |  |
| If not, please state below the form of correction used: |
| **First Name:** |  | **Surname:** |  |

|  |  |  |
| --- | --- | --- |
| **5.4** | **Have you been vaccinated against the following?** | **Hepatitis A** |
| Yes: No: Date Vaccinated: |
| **5.5** | **Have you been vaccinated against the following?** | **Hepatitis B** |
| Yes: No: Date Vaccinated: |
| **5.6** | **Have you been vaccinated against the following?** | **Tetanus** |
| Yes: No: Date Vaccinated: |
| If you have answered “No” to any of the above and wish to avail of a vaccine through the Council’s Occupational Health Advisor, please complete a copy of the **Vaccination Consent Form** with this application. |

### Section 7 – Availability

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| **6.1** | **What is your current occupation?**  |
| **6.2** | **If offered a post, will you be available to take up duty for the following periods during the summer bathing season?** (please tick) |
|  | **Yes** | **No** |
| Beginning or Weekends in June**Note: Positions on Bundoran & Rossnowlagh beach begin full time on June 1st; all other beaches commence weekends only from June 4th then full-time from 1st July** |  |  |
| July and August (six days per week, including weekends) **Note: No annual leave will be granted during this period**  |  |  |
| September – weekends up to 15th September 2022 |  |  |

### Section 8 – Driving Licence

|  |  |  |  |
| --- | --- | --- | --- |
| **7.1** | **Do you hold a valid category B driving Licence?** (please tick) | **Yes** | **No** |
|  |  |
| **7.2** | **Will you have access to your own transport during the summer bathing season?** (please tick) | **Yes** | **No** |
|  |  |
| **First Name:** |  | **Surname:** |  |

### Section 9 – Previous Employment as a Beach Lifeguard

Please give particulars below of your previous employment as a Beach Lifeguard over the last five years

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Year** | **Name of Beach & Employer** | **Senior or Junior Lifeguard** | **Dates** | **Total Hours** |
| **2021** |  |  |  |  |
| **2020** |  |  |  |  |
| **2019** |  |  |  |  |
| **2018** |  |  |  |  |
| **2017** |  |  |  |  |
| ***Where your experience has been with another Local Authority or employer, you should submit a signed statement from each employer using format outlined in Appendix 1.***  |

### Section 10 – Previous Employment as a Pool Lifeguard

Please give particulars below of your previous employment as a Pool Lifeguard over the last five years

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Year** | **Name of Pool & Employer** | **Senior or Junior Lifeguard** | **Dates** | **Total Hours** |
| **2021** |  |  |  |  |
| **2020** |  |  |  |  |
| **2019** |  |  |  |  |
| **2018** |  |  |  |  |
| **2017** |  |  |  |  |
| ***You must submit a signed statement from each employer using format outlined in Appendix 2.***  |

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| --- | --- | --- | --- |
| **First Name:** |  | **Surname:** |  |

### Section 11 – Pool Test

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| --- | --- | --- | --- |
| **10.1** | **Have you attended a Water Safety Ireland Pool Test?** | **Yes** | **No** |
|  |  |
| **(a)** If you have or propose to complete the pool test in County Donegal – please give the date of the test: |
| **(b)** If you have or propose to complete the pool test in another county – please give name of the Local Authority overseeing the test and the date of same: |

### Section 12 – Interview

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| --- | --- | --- | --- |
| **11.1** | **Will you be available to attend for interview on various dates (11 – 22 April 2022)?** | **Yes** | **No** |
|  |  |
| **11.2** | If you cannot attend an interview on either of these dates, please indicate why you will not be available.  |

### Section 13 – Uniform

Please indicate the size of uniform which you would require if successfully appointed to the Beach Lifeguard role.

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| --- | --- | --- | --- | --- | --- |
| **Size** | **Hoodie** | **Shorts** | **T-Shirt** | **Tracksuit Trousers** | **Tracksuit Jacket** |
| Small |  |  |  |  |  |
| Medium |  |  |  |  |  |
| Large |  |  |  |  |  |
| X-Large |  |  |  |  |  |

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| --- | --- | --- | --- |
| **First Name:** |  | **Surname:** |  |

### Section 14 – Beach Preference

Please indicate whether you wish to be considered for the following position(s).

Please note you may indicate a preference for one or more positions.

|  |  |  |
| --- | --- | --- |
| **Position** | **Yes** | **No** |
| Senior Lifeguard |  |  |
| Junior Lifeguard |  |  |
| Cover/Relief |  |  |
| All |  |  |

Below is a list of the Beaches on which it is proposed to employ Beach Lifeguards during the summer 2022 & 2023. Please indicate in the PreferenceColumn, *in order of preference*, the beaches on which you would be willing to work, should your application be successful.

Please number your preference 1 – 10, with 1 as your preferred location.

|  |  |  |
| --- | --- | --- |
| Beach Location | **Preference** | **Reason for Preference** e.g.Proximity of beach to residence etc**.** |
| ***Bundoran*** |  |  |
| ***Rossnowlagh*** |  |  |
| ***Murvagh*** |  |  |
| ***Fintra (Killybegs)*** |  |  |
| ***Narin*** |  |  |
| ***An Charraig Fhinn (Carrickfinn) (Beside Airport)*** |  |  |
| ***Marblehill*** |  |  |
| ***Na Dúnaibh (Downings)*** |  |  |
| ***Magherawarden (Portsalon)*** |  |  |
| ***Rathmullan*** |  |  |
| ***Culdaff*** |  |  |
| ***Lisfannon (Fahan)*** |  |  |
| ***Shroove (Greencastle)*** |  |  |
| ***Trá na Cille (Killahoey) (Dunfanaghy)*** |  |  |
| ***Cover*** (Please tick if you have access to your own transport and are interested in providing cover on a number of beaches). |  |  |
| **I wish to be considered for all locations (tick)** |  |

Please note that the Council may not be in a position to facilitate all beach preference requests. If your application is successful, the Council will endeavour to place you in a location of your choice. However, the Council reserves the right to assign you to any area within the Council, from initial appointment, or in the future, at any point during your employment, subject to reasonable notice.

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| **First Name:** |  | **Surname:** |  |

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| Section 15 – References |
| Please provide the names of two responsible persons as referees to whom you are well known but *NOT* related. If you are currently employed, one of the referees should be a present employer. |
| Referee No. 1 - | Referee No. 2  |
| Name: | Name: |
| Address: | Address: |
| Contact number: | Contact number: |
| Email address: | Email address: |

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| Section 16 – Criminal Record |
| I declare that if I am in receipt of any criminal record/convictions/prosecutions at present or at any time during my employment with Donegal County Council it is my responsibility to bring this to the attention of the Human Resources Division without delay. **(Please tick to confirm)****N.B.** The National Vetting Bureau (Children and Vulnerable Persons) Act 2012 to 2016 (The Act) provides a legislative basis for, and a statutory obligation on Donegal County Council, as a relevant organization, to ensure that those persons who seek positions of employment relating to **relevant work or activities** are vetted**.** Disclosures received from the National Vetting Bureau in relation to offences of a sexual nature are not compatible with employment as a Beach Lifeguard. |  |

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| **First Name:** |  | **Surname:** |  |

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| Section 17 – Declaration & Consent  |
| **I, the applicant, in submitting this application, hereby declare all the foregoing particulars to be true. I also authorise Donegal County Council to conduct reference checks and qualification checks, as required.** |
| Name: |  |
| Date: |  |

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| Section 18 – Parent / Guardian Consent  |
| If the applicant is under 18 years of age **at the time of submitting this application**, Parent / Guardian Consent to apply for this competition is required, as follows:I hereby consent to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (applicant name) applying for the Donegal County Council Beach Lifeguard Panel (2022 / 2023 Season) competition.Parent / Guardian Name (print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Parent / Guardian Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Notes

***Applicants should read these notes and the Information for Candidates Booklet carefully before completing the application form.***

**Completion of the Application Form**

Before you return your application form, please ensure that you have completed all sections and that you have signed the declaration. It is the responsibility of candidates to establish their eligibility for the post through the information provided on the application form.

**Submission of Application Form & Accompanying Documents**

Completed application forms and accompanying documentation should be returned by post to the Recruitment Section at the below address:

**Human Resources Department**

**3 Rivers Centre**

**Lifford**

**Co. Donegal**

**F93 Y622**

The closing date for submission of completed applications is **12 Noon, Monday 07 March 2022**

Applicants must submit the following:

(a) Fully completed and signed copy of the application form.

(b) Valid Beach Lifeguard Certificate (original).

(c) Other qualifications (originals).

(d) Completed appendices 1 and 2, signed by the relevant employer(s), if applicable.

(e) Fully completed NVB1 Garda Vetting Invitation form. (and NVB3 if applicant is under 18 years of age)

**Proof of receipt of Application Form**

It is the responsibility of candidates to ensure the proper delivery and receipt of their applications. It would be advisable to obtain a certificate of posting from your Post Office.

**Further Queries**

By email: vacancies@donegalcoco.ie

By telephone: 074 9172221

Important!

*Canvassing by or on behalf of the applicant will automatically disqualify.*

*Donegal County Council is an Equal Opportunities Employer*

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| Check List – Beach Lifeguard Competition  |
| **Before you return your application form, please ensure that you have checked and included the following with your application.**  |
| Indicate “Yes” with an X or insert “not applicable” as NA. | **X or NA** |
| I have enclosed a fully completed application form (Section 1 – 16)  |  |
| I have signed and dated the Declaration (Section 17) |  |
| My Parent / Guardian has completed Section 18 (if applicable) |  |
| I have submitted a Valid Beach Lifeguard Certificate (Original) |  |
| A relevant employer has completed and signed the Details of Beach Lifeguard Experience Form **(Included as Appendix 1)** |  |
| A relevant employer has completed and signed the Details of Pool Lifeguard Experience Form **(Included as Appendix 2)** |  |
| I have fully completed the NVB1 Garda Vetting invitation form (and a Parent/Guardian has fully completed NVB3 form if applicable) |  |
| Do you require any reasonable accommodations to participate in the Recruitment Process?(The Recruitment Process may include a Pool Test and a Virtual Interview). |  |

|  |
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| Reasonable Accommodation |
| Please tick as appropriate |  |
| Do you require any reasonable accommodations to participate in the Recruitment Process?(The Recruitment Process may include a Pool Test and a Virtual Interview). |  |