|  |  |  |  |
| --- | --- | --- | --- |
| **1. Name *(Block Letters)*:** | | | |
| **2. Address:** | | | |
| **3. Date of Birth:** | | **4. PPS Number:** | |
| **5. Mobile Phone No.:** | | **6. Email Address:** | |
| **Please ensure you include your email address as this will be the main form of contact in relation to your application.** | | | |
| **7. Education Standard Attained:** | | | |
| **8. Give particulars of past and present employment** | | | |
| **Firm:** | | **Address:** | |
| **Employed as:** | **From:** | | **To:** |
| **Reason for leaving:** | | | |
| **Firm: Address:** | | | |
| **Employed as:** | **From:** | | **To:** |
| **Reason for leaving:** | | | |
| **Firm: Address:** | | | |  |
| **Employed as:** | **From:** | | **To:** |
| **Reason for leaving:** | | | |
| **9. Give names and contacts of two people not related to you and to whom reference as to character may be made** | | | |
| **Name:** | | **Contact:** | |
| **Name:** | | **Contact:** | |
| **10. Have you ever met with an accident, or received compensation under employer’s liability, or suffered from an industrial disease?**  **If yes, give particulars** | | | |
| **11. Have you ever had any serious illness or operation?**  **If yes, give particulars** | | | |
| **12. Have you ever been convicted of an offence?**  **If yes, give particulars** | | | |
| **13. Have you ever been involved in a traffic accident(s) for which you were held responsible?**  **If yes, give brief outline of accident(s)**  **Page 2** | | | |
| **14. Do you hold a current Driving Licence?**  **If yes, state category of licence.**  **(Please attach copy)** | | | |
| **15. Have you ever been disqualified by a Court from holding a Driving Licence or a Provisional Driving Licence?**  **If yes, state**  **(a)Reason**  **(b) Period of disqualification**  **(c) Date of disqualification**  **(d) Court** | | | |
| **15a. Have you previously obtained Garda Vetting?**  **If yes, please attach copy.**  **If No, are you willing to undergo Garda Vetting for the purpose of this employment?** | | | |
| **16. Has a Court ever made an order requiring the endorsement of your Driving Licence or a Provisional Driving Licence?**  **If yes, state**  **(a)Reason**  **(b) Period of endorsement**  **(c) Date of endorsement**  **(d) Court** | | | |
| **17. Have you ever been refused motor insurance cover? If yes, give outline of the circumstances.** | | | |
| **18. Have you ever lost your motor insurance no claims bonus? If yes, give outline of the circumstances.** | | | |
| **Additional information as to education, trade qualifications or experience.** | | | |
|  | | | |

**Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Any false statement will debar the applicant from employment, or if already employed, will render him/her liable to dismissal.**

**Cronin’s Coaches Ltd is an Equal Opportunities Employer.**

**Applications to be forwarded to: John Quirke, Transport Manager, Cronin’s Coaches Ltd,**

**Shannon Buildings, Mallow Road, Cork.**

**Or email john.quirke@croninscoaches.com**