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###### **Application Form**

###### **JOB TITLE: DIRECTOR OF INNOVATION & ENTREPRENEURSHIP**

###### **REFERENCE: ITI/CEO/DOIE/12/21**

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| Notes – Please read before completing the application form |

* Applicants should submit this form only; supplementary material such as CV’s will not be considered.
* You should use this form to highlight relevant and appropriate experience given the essential and desirable criteria outlined in the job description.
* Application forms should be completed by **typing** in Calibri 12 or handwritten in BLOCK CAPITALS using **BLACK INK.**
* **Candidates are ADVISED THAT the allocated space for responses must not be extended to supplement answers.**
* Please return your completed form to Human Resources by email: recruitment@intertradeireland.com
* Completed application forms must be returned by **5.00 PM ON MONDAY 24th JANUARY 2022**

***(we anticipate that interviews will be held week commencing 31st January 2022)***

**PART A:**

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| **1. Personal Details**  |

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| **Title** | **First Name** | **Last Name** |
| Enter your title | Enter your first name | Enter your last name |

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| **Address for Correspondence** | **Contact Details****(Please note that we will use your email address as the primary method of correspondence)** |
| Enter your address | Home Phone Number: Enter your home phone numberMobile Phone Number: Enter your mobile phone numberEmail Address: Enter your email address |

**PART B:**

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| **2. Education and qualifications**  |

##### **Please list all relevant secondary education qualifications obtained:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Qualification** | **Subject** | **Grade** | **Date Obtained** |
| Enter qualification | Enter subject | Enter grade | Enter date obtained |

##### **Please list all relevant Further and Higher qualifications obtained:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Institution Name** | **Qualification/Field of Study** | **Grade** | **Date Obtained** |
| Enter institution name | Enter qualification / field of study | Enter grade | Enter date obtained |

**Training and Professional Qualifications:**

Please list all relevant training and professional qualifications obtained:

|  |  |  |  |
| --- | --- | --- | --- |
| **Course Title** | **Qualification/Field of Study** | **Grade** | **Date Obtained** |
| Enter course title | Enter qualification / field of study | Enter grade | Enter date obtained |

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| **3. Employment History**  |

This section should contain an outline of your career in the last 10 years, starting with your current/most recent employment. Please continue on a separate sheet if required.

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| --- | --- | --- | --- |
| **Employer Name/Nature of Organisation** | **Position Held** | **Dates held position** ***(from and to)*** | **Career Narrative*****(key duties, reporting structure, staff responsibilities etc.)*** |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |

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| **4. Information for Sifting Purposes** |

In this section we would like you to provide information which will aid the sifting process. In each of the following sections please state how you meet the particular experience, understanding, knowledge and qualities sought, giving a least one example from your **work experience and specifying dates as appropriate.**

Please ensure this section of the form is completed fully and thoroughly to aid selection decision making and that you have referred to the information provided in the Job Description and Person Specification when providing your answers.

**allocated space must not be extended to supplement answers.**

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| **Essential Criteria 1****A degree qualification or equivalent third level professional qualification *(please detail below qualification, grade and date achieved)*** |
| Click or tap here to enter text. |

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| **Essential Criteria 2:** **Please demonstrate, by example, a minimum of 5 years \*senior management experience working in an economic or business development role in a public or commercial private sector organisation. *\*For senior management definition please refer to the job description. Organisation charts can be included separately to show reporting structure.*** |
| Click or tap here to enter text. |

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| **Essential Criteria 3****Please demonstrate, by example(s), your experience of leading the development and delivery of innovation or entrepreneurship/business growth strategy, initiatives or programmes in response to business needs, thus demonstrating a high level of commercial awareness and understanding of economic and business issues.** |
| Click or tap here to enter text. |

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| **Essential Criteria 4****Please demonstrate, by example(s), your strong capacity for strategic thinking with proven experience of developing strategy to successfully deliver the aims and objectives of an organisation at \*senior management level. *\*For senior management definition please refer to the job description.***  |
| Click or tap here to enter text. |
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| **Essential Criteria 5****Please demonstrate, by example(s), your comprehensive understanding of SME’s and the wider economic issues affecting them.** |
| Click or tap here to enter text.  |
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| **Desirable Criteria 1****A postgraduate qualification in a discipline related to the duties of the post e.g. innovation, entrepreneurship, business, leadership and management.** |
| Click or tap here to enter text.  |
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**PART C:**

This information will be treated in the strictest confidence and will not form part of your application.

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| **5. Additional Information** |

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| **Current/most recent salary:** *(the successful candidate will be asked to provide copies of their last 3 payslips)* | Click or tap here to enter text. |
| **Length of Notice**: | Click or tap here to enter text. |

This post may require travel across the island and individuals must have access to a suitable form of transport to meet the requirement of the job.

Please indicate whether you meet this requirement:

**Yes** [ ]

**No** [ ]

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| **Where did you hear about this vacancy?**Click or tap here to enter text. |

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| 6. Declaration |
| I confirm to the best of my knowledge that the information provided by me on this application form are true and accurate. I understand that the deliberate falsification of information may prejudice my application or lead to an offer of appointment being withdrawn.**I understand that all information supplied on this application form will be kept strictly confidential and will only be used for the purpose of selection and administration.**Signature: insert name hereDate: select date from dropdown |

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## MONITORING INFORMATION

### **Monitoring Reference Number: ITI/CEO/DOIE/12/21**

InterTradeIreland monitors the applications it receives for jobs in order to ensure that their recruitment practices promote equality of opportunity.

This information will be treated in the strictest confidence and protected from misuse, and will not form part of your application. It will be used only for the purpose of monitoring our equal opportunity employment policy.

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| Please indicate your religion or the religion to which you would be perceived to belong by ticking the appropriate box below: |
|  |  |  |
| I am a member of the Protestant Community |[ ]   |
| I am a member of the Roman Catholic Community |[ ]   |
| I am a member of neither the Protestant nor the Roman Catholic Community |[ ]   |

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| Please indicate your gender by ticking the appropriate box below: |
|  |  |  |  |  |  |
| Male |[ ]   |  |  |  |
| Female |[ ]   |  |  |  |

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| **Please describe your ethnic origin by ticking the appropriate box below:** |
|  |  |  |  |  |  |
| White |[ ]   | Indian |[ ]   |
| Irish Traveller |[ ]   | Pakistani |[ ]   |
| Black – Caribbean |[ ]   | Bangladeshi |[ ]   |
| Black - African |[ ]   | Chinese |[ ]   |
| Black – Other (please specify) |[ ]   | Click or tap here to enter text. |  |  |
| Other (please specify) |[ ]   | Click or tap here to enter text. |  |  |

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| Under the Disability Discrimination Act 1995 a person is considered to have a disability if he/she has a physical or mental impairment which has substantial and long-term adverse effect on his/her ability to carry out normal day to day activities.**Do you consider that you meet this definition of disability?** |
|  |  |  |  |  |  |
| Yes |[ ]   |  |  |  |
| No |[ ]   |  |  |  |
|  |  |  |  |  |  |
| If YES please state the nature or effects of your disability |  |  | Click or tap here to enter text. |  |  |