

**EMPLOYMENT APPLICATION FORM**

I have read and understood Section 5 of the job specification

outlining the Application and Selection process. Yes  No

**SECTION 1: PERSONAL DETAILS**

Post Applied For: **Assistant Professor in Mathematics Education**

Closing Date: **2pm on Wednesday, 2nd October 2024**

Surname: First Name: Title:

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| Do you require a work permit to work in Ireland?  (If you currently have a valid permission to work in Ireland that is not restricted to a particular employer, please indicate “no”) | Yes | No |

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| --- |
| Daytime Contact No: |
| E-mail Address: |

Correspondence Address:

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**SECTION 2: EDUCATION**

**Third Level Education:**

Academic, Professional and Technical Qualifications– give details in date order starting with earliest qualification. (***Please include degree classification.)***

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| --- | --- | --- | --- | --- | --- |
| Dates | | Name of College: | Course Taken: | Title of Qualification Obtained Cert.,  Diploma, Degree, etc | Name of Conferring Body: |
| From: To | To: |
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**Additional Courses/Training:**

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| Dates | | Name of College: | Course Taken: | Title of Qualification obtained: (where applicable) | Name of Awarding Body: |
| From:  To | To: |
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**Current Courses/Training:**

**SECTION 3: EMPLOYMENT RECORD**

Please note all positions held following fulltime education. Start with your current position and work backwards. Explain any gaps in employment.

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| --- | --- | --- | --- |
| Date from: | Date to: | Period of employment in months: | Job Title: |
| Employer name and address: | | | |
| Brief description of duties and responsibilities | | | |
| Reason for leaving: | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| Date from: | Date to: | Period of employment in months: | Job Title: |
| Employer name and address: | | | |
| Brief description of duties and responsibilities | | | |
| Reason for leaving: | | | |

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| --- | --- | --- | --- |
| Date from: | Date to: | Period of employment in months: | Job Title: |
| Employer name and address: | | | |
| Brief description of duties and responsibilities: | | | |
| Reason for leaving: | | | |

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| --- | --- | --- | --- |
| Date from: | Date to: | Period of employment in months: | Job Title: |
| Employer name and address: | | | |
| Brief description of duties and responsibilities | | | |
| Reason for leaving: | | | |

**SECTION 4: TEACHING AND LEARNING**

Please detail your experience, skills and knowledge under the following criteria – Teaching innovation, development of curriculum or new courses, Development of teaching aids and assessment methods. Try to be as concise as possible without omitting any important information.

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**SECTION 5: RESEARCH PROFILE**

**Publications and Conference Presentations**

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| --- | --- | --- | --- | --- | --- | --- |
|  | Published | | In Press | | In Preparation | |
|  | No. | Total pages | No. | Total pages | No. | Total pages |
| Monographs |  |  |  |  |  |  |
| Jointly Authored Books |  |  |  |  |  |  |
| Edited Books |  |  |  |  |  |  |
| Academic Reports |  |  |  |  |  |  |
| Book Chapters |  |  |  |  |  |  |
| Papers in **Peer reviewed** Journals |  |  |  |  |  |  |
| Papers in **Non-Peer reviewed** Journals |  |  |  |  |  |  |
| International Conference Papers |  |  |  |  |  |  |
| Other |  |  |  |  |  |  |

Please provide an itemised list for each of the above categories using a standard bibliographic convention.

**RESEARCH PROFILE cont’d**

In the section below, please provide any relevant additional detail e.g. Conference name and location, dates, title of paper(s), publication title(s), name of publisher, peer reviewed etc.

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| Supplementary detail: |
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Please provide details of research interests or plans. Where applicable, please include experience in submitting funding requests and successes in securing grant, contract or funding awards.

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**SECTION 7: CANDIDATE CRITERIA**

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| Demonstrate a minimum of three years’ relevant experience, at least two year of which are in teaching at primary, post-primary or third level; |

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| Outline specialist expertise in Mathematics Education; |

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| Outline your experience in on-line education, blended, distance and flexible learning routes; |

**SECTION 8: ADDITIONAL INFORMATION**

Please give details of any additional achievements, interests or other additional information, which you feel, may support your application.

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Where did you learn of this vacancy?

Notice Period to Current Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECTION 9: REFERENCES/TESTIMONIALS**

Successful applicants will be required to provide the names of two people who have consented to be approached for a reference on your behalf, at least one of whom will be your current employer.

**SHORTLISTING OF APPLICATIONS WILL BE BASED ON THE INFORMATION PROVIDED BY YOU IN THIS APPLICATION FORM**

# **SECTION 10: DECLARATION**

It is important that you read this Declaration carefully prior to signing.

“I declare that to the best of my knowledge and belief there is nothing in relation to my conduct, character or personal background of any nature that would adversely affect the position of trust in which I would be placed by virtue of this appointment. I hereby confirm my irrevocable consent to the College to the making of such enquiries as the College deems necessary in respect of my suitability for the post in respect of which this application is made. I hereby accept and confirm the entitlement of the College to reject my application or to terminate my employment (in the event of a contract of employment having been entered into) if I have omitted to furnish the College with any information relevant to my application or to my continued employment with the College or where I have made any false statement or misrepresentation relevant to this application or my continuing employment with the College.

Furthermore, I hereby declare that all the particulars furnished on this application are true, and that I am aware of the qualifications and particulars for this position. I understand that I may be required to submit documentary evidence in support of any particulars given by me on my Application Form. I understand that any false or misleading information submitted by me will render me liable to automatic disqualification.

FAILURE TO SIGN THIS DECLARATION WILL RENDER THE APPLICATION INVALID

SIGNATURE: DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Data Privacy Notice**

**Recruitment and Selection**

MIC collects and processes personal data relating to job applicants as part of its recruitment process. This data is treated with the highest standards of security and confidentiality in accordance with the General Data Protection Regulations (GDPR).  Data may be contained in application forms or CVs submitted by you, obtained from your passport or other identity documents, or collected through interviews or other forms of assessment.

We will only seek information from third parties, such as referees and An Garda Síochána, if your application is successful and we will inform you that we are doing so.  Your information may be shared for the purposes of the recruitment exercise with members of the HR team, interviewers involved in the recruitment process, managers in the department with a vacancy and IT staff if access to the data is necessary for the performance of their roles.  Your data will be stored on your application record, in HR management systems and on other IT systems (including email).  If your application is unsuccessful, MIC will keep your personal data on file in accordance with its records retention schedule.  If your application for employment is successful, personal data gathered during the recruitment process will be transferred to your Human Resources and payroll files (electronic and paper based) and retained during your employment and in accordance with the MIC records retention schedule.

For further information on how MIC organises and administers information in compliance with statutory requirements such as the Freedom of Information Act and the GDPR visit the Information Compliance section of our website <https://www.mic.ul.ie/about-mic/information-compliance>

I consent to my data being processed in accordance with this data privacy notice.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_