**Application Form**

**(Academic/Research Funded Roles)**

Please submit your application form through the online system.

| **ABOUT THE VACANCY** |
| --- |
| **POSITION APPLIED FOR** |
| Job Reference Number\* | Job Title\* |
|   |  |
| THIS APPLICATION WILL BE TREATED IN STRICT CONFIDENCE |
|  |
| **YOUR PERSONAL DETAILS** |
| Title | Please select title | Please Specify: |   |
| Surname(s)\* |   | First Name(s)\* |   |
| Permanent Address\* |   |
| Contact Number\* |   |
| Email Address\* |   |
| \*\*Are you currently eligible to work in the Republic of Ireland? | Please enter Yes/No |
| *\*\*Please note that you will be required to prove eligibility to work in the Republic of Ireland as part of the recruitment process as it is a condition of employment with DCU that employees must be eligible to work in the Republic of Ireland.* |

| **EMPLOYMENT HISTORY** |
| --- |
| **CURRENT EMPLOYER** |
| Employer\* | Nature of Business\* | Position\* | Commencement Date (MM/YY)\* |
|   |   |   |  MM/YY |
| Description of Duties and Responsibilities\* |
|   |
| Current Salary\* | Benefits, Allowances and Pension Arrangements |
|   |   |
| **PREVIOUS POSITIONS** |
| From(MM/YY) | To(MM/YY) | Employer | Position Held | Reason for leaving |
|  MM/YY |  MM/YY |   |   |   |
|  MM/YY |  MM/YY |   |   |   |
|  MM/YY |  MM/YY |   |   |   |
|  MM/YY |  MM/YY |   |   |   |
|  MM/YY |  MM/YY |   |   |   |
|  MM/YY |  MM/YY |   |   |   |
| **ADDITIONAL INFORMATION**How do you meet the required criteria?.\* |
|   |
| **Please outline further information that may help in assessing your application** Leisure time interests may be included here |
|   |
| **ACADEMIC HISTORY** |
| **HAVE YOU OBTAINED A PHD QUALIFICATION?\*** | **Please enter Yes/No** |
| *If yes, please include details below.* |  |
| Year Awarded | Education Institution | Subject |
|   |   |   |
| **ACADEMIC QUALIFICATIONS** |
| Higher Education Institution | From(MM/YY) | To(MM/YY) | Academic Qualification | Final Examination Results |
|   |  MM/YY |  MM/YY |   |   |
|   |  MM/YY |  MM/YY |   |   |
|   |  MM/YY |  MM/YY |   |   |
|   |  MM/YY |  MM/YY |   |   |
|   |  MM/YY |  MM/YY |   |   |
| **WORK EXPERIENCE** |
| Number of years full-time research experience |   |
| Number of years full-time teaching experience |   |
| Number of years experience working in an academic role |   |
| Number of years experience working in a professional or mixed role |   |
| **TEACHING EXPERIENCE**  |
| Do you have teaching experience? |  Please enter Yes/No  |
| Level of Responsibility |   |
| Co-ordinated modules including module design |  Please enter Yes/No  |
| Supported module delivery in a lecturing role |  Please enter Yes/No  |
| Supported module delivery as a demonstrator/tutor |  Please enter Yes/No  |

|  **RESEARCH** |
| --- |
| **Please provide a personal research statement\****You may include details of key projects, collaborations and public engagements* |
|   |
| List three key publications and outline why they were impactful |
|   |

| Plans for Future Research |
| --- |
|   |
| Outline how your plans for future research will fit in line with the school direction and ethos |
|   |

| **EXTERNAL ENGAGEMENT** |
| --- |
| Please outline your professional experience |
|   |
| What experience do you have in academic service roles/ external engagement beyond the University? |
|   |
| Outline infrastructure and/ or support requirements |
|   |

| **REFEREES** |
| --- |
| Please list three persons from whom the University may request references on your behalf. They should be such as to be able to comment in detail on your career. Applicants must include their present employer or past employer (if not currently employed). |
| NAME – REFEREE ONE\* | NAME – REFEREE TWO\* | NAME – REFEREE THREE\* |
|   |   |   |
| Job Title\* | Job Title\* | Job Title\* |
|   |   |   |
| Institution / Organisation\* | Institution / Organisation\* | Institution / Organisation\* |
|   |   |   |
| Email Address\* | Email Address\* | Email Address\* |
|   |   |   |
| Contact Number\* | Contact Number\* | Contact Number\* |
|   |   |   |
| ☐  | I give DCU my permission To contact this Referee\* | ☐  | I give DCU my permission To contact this Referee\* | ☐  | I give DCU my permission To contact this Referee\* |
|  |
|  |
| **PERIOD OF NOTICE** |
| How soon after an offer of appointment would you be in a position to take up employment?\* |   |
| **ADVERTISING** |
| Where did you see this position advertised?\* |   |
| **DECLARATION** |
| ☐  | I certify that all statements on this application are true without omission and understand that any misstatement given disqualifies my application or may result in dismissal if employed by the University. I fully recognise that canvassing disqualifies my application.\* |
| **PRIVACY NOTICE** |
| ☐ | I have read and understand the [DCU Privacy Notice](https://www.dcu.ie/info/information-dublin-city-university-privacy-statement-0)\* |
| \*If required fields are not completed, your application will not be considered\*☐ |
|

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