APPLICATION FORM

Temporary Administrative Assistant – Maternity Leave Cover

Embassy of Ireland to Italy

PERSONAL DETAILS

Name	
Address	
Email *(please note that this is the address to which we will send all correspondence)*	
Mobile phone *(please include all codes)*	
Other phone number	

EDUCATION HISTORY

Third level (undergraduate):

Institution attended	Degree	Year in which degree/qualification obtained	Result (eg 2.1)

Third level (post-graduate if applicable):

Institution attended	Degree	Year in which degree/qualification obtained	Result

WORK EXPERIENCE (including full time and part time positions):

Dates	Employer	Job Title and Responsibilities	Start date	End Date

*Please use extra lines as required.

OTHER SKILLS
Foreign Language Skills (pleases indicate your level of proficiency)

Mother tongue(s)								
Other language(s)								
Self-assessment	**Understanding**				**Speaking**			**Writing**
European level (*)	Listening		Reading		Spoken interaction		Spoken production	
English								
Italian								
	(*) Common European Framework of Reference for Languages							

COMPUTER SKILLS

(please indicate your level of computer skills/knowledge)

ANY OTHER RELEVANT INFORMATION

REFEREES *(please indicate two referees – appointment to the position will be subject to satisfactory references)*	
Name and Title	*Contact Information (email and telephone)*
Name and Title	*Contact Information (email and telephone)*

Signature of Applicant _____   Date _____