|  |
| --- |
|  Application Form **Postdoctoral Researcher in UV Index** |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **First Name:** |  |  |  |  **Surname:** |  |  |

You must ensure that all sections of this application form are completed in full. This section of the form will

be photocopied for use by the Interview Board.

1. **PROFESSIONAL QUALIFICATIONS:** Please include details that demonstrate you meet the essential academic criteria listed in the competition booklet. If this cannot be confirmed, you will not be shortlisted for interview**.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Full title of Qualifications held****and date obtained**  | **Grade obtained (e.g. 1, 2.1, 2.2, Pass, etc.)** | **Subject(s) taken in final examination** | **University, College or Examining Authority** |
| **Year obtained:** |  |  |  |
| **Year obtained:** |  |  |  |
| **Year obtained:** |  |  |  |
| **Year obtained:** |  |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **First Name:** |  |  |  |  **Surname:** |  |  |

**2. Employment Record:**

Give below, in date order (starting with your current employer), full particulars of all employment (including any periods of unemployment) between the date of leaving school or college and the present date. No period

between these dates should be unaccounted for. If it is necessary to continue on a separate sheet, please

set the information out in the same manner as below.

|  |  |  |
| --- | --- | --- |
| **Dates** | **Title of post held, short description of duties, salary, etc.** | **Name and address of employer** |
| **Period in months** | **From** | To |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **First Name:** |  |  |  |  **Surname:** |  |  |

**EMPLOYMENT RECORD Continued:**

|  |  |  |
| --- | --- | --- |
| **Dates** | **Title of post held,****short description of duties, salary, etc.** | **Name and address of employer**  |
| **Period in months** | **From** | To |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **First Name:** |  |  |  |  **Surname:** |  |  |

3. Please give a brief description of your knowledge or experience, pertaining to the following areas.

(i) Analytical methodology relating to atmospheric chemistry and UV analysis or a related discipline.

|  |
| --- |
|  |

(ii) Engagement and collaboration with external stakeholders.

|  |
| --- |
|  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **First Name:** |  |  |  |  **Surname:** |  |  |

(iii) Development of forecast models.

|  |
| --- |
|  |

**4. Please set out below any other relevant information in support of your application**

|  |
| --- |
|  |
| **First Name:** |  |  |  |  **Surname:** |  |  |

5. Please list 2 referees

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Reference 1**

|  |  |
| --- | --- |
| **Name** |  |
| **Job Title** |  |
| **Company** |  |
| **Address** |  |
| **Phone** |  |
| **Email** |  |

 |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Reference 2**

|  |  |
| --- | --- |
| **Name** |  |
| **Job Title** |  |
| **Company** |  |
| **Address** |  |
| **Phone** |  |
| **Email** |  |

 |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **First Name:** |  |  |  |  **Surname:** |  |  |

Please tick this box if you intend to apply for the Hosting Agreement [ ]

Before you return the form please ensure that you have completed all sections of the declaration below.

The onus is on candidates to establish eligibility in this application form.

Misstatements or canvassing will render an applicant liable to disqualification.

The personal data supplied by you on this application form will be stored on computer and will be used only for the purposes registered under the Data Protection Acts, 1988 and 2003.

I hereby declare that I fulfil all the requirements, that the information given in this form is correct and give my permission for enquiries to be made to establish such matters as qualifications, experience and character and for the release by other people or organisations of such information as may be necessary to Met Éireann for that purpose.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_