



Leitrim County Childcare Committee Coiste Cúram Leanaí Chontae Liatroma

Laird House, Church Street, Drumshanbo, Co. Leitrim
Teach Laid, Sráis na hEaglaide, Droim Seanbhó, Co. Laitroma

CHILDCARE WORKERS PANEL APPLICATION FORM

Name
Address
Telephone number
Email address

Qualifications: please give details below of relevant qualifications, education and training

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Current / most recent employment: please give details

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Relevant Experience: please give details of relevant employment experience

DATES		EMPLOYER	YOUR POSITION/ROLE
From	To		
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Additional Information: (e.g. relevant voluntary experience, additional training)

References: Please give details below of your current/most recent employer and the name and address of another referee.

Referee One

Referee Two

<p>Name of Company/ Organisation</p> <p>_____</p> <p>Contact Person</p> <p>_____</p> <p>Address</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Telephone: _____</p>	<p>Name of Company/ Organisation</p> <p>_____</p> <p>Contact Person</p> <p>_____</p> <p>Address</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Telephone: _____</p>
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I confirm that the information supplied by me above is true and accurate.

Signed _____ **Date** _____

Please return completed application form to: **Leitrim County Childcare Committee, Laird House, Church Street, Drumshanbo, Co. Leitrim.**

Telephone: 0719640870 or Email: info@leitrimchildcare.ie