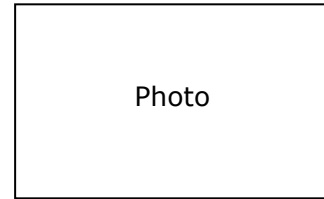


Name: _____

Email: _____



Irish Aid

An Roinn Gnóthaí Eachtracha agus Trádála
Department of Foreign Affairs and Trade

GOVERNANCE PROGRAMME OFFICER

APPLICATION FORM

SECTION A. PERSONAL & CONTACT INFORMATION

Title: Ms/Mr/Dr etc.	
Surname:	
First Name:	
Contact Address:	
P.O. Box:	
Date of Birth:	
Telephone Home: (incl. international code)	
Telephone Work:	
Mobile:	
E-Mail:	
Citizenship:	

Name: _____

Email: _____

SECTION B. EDUCATION

Primary degree	
Qualification (Title & grade)	
Awarded by (university/ college or professional body)	
Year awarded	
Major subjects taken to degree level	

Other Degree(s) or professional qualifications	
Qualification (Title & grade)	
Awarded by (university/ college or professional body)	
Year awarded	

Qualification/ college (Title & level achieved)	
Awarded by (university or professional body)	
Year awarded	

Training received of relevance to this role – specify provider, content, duration and year	
---	--

Copies of any awards and certificates should be attached.

Name: _____

Email: _____

SECTION C. SKILLS

<p><i>Please rate your level of expertise based on the following ranking: 3 = proven expertise; 2 = some direct experience; and 1 = some understanding but no experience; Blank = no knowledge</i></p>	
Expertise	Rating (3, 2, 1 or blank)
Managing tender processes and contracting	
Financial Management of budgets and disbursements, and financial review of project documents, audit follow-up	
Information Management – managing soft and hard files and using a database	
Experience in technical oversight of capacity development for Civil Society	
Knowledge and experience of the operating environment for civil society in Ethiopia, and of the role of civil society	
Knowledge and experience of mainstreaming cross cutting issues (particularly gender and governance)	
Training and facilitation skills – direct delivery of training	
Report writing	
Experience with strategy development processes	
Knowledge and experience of Social Accountability and participatory approaches	
Experience in Monitoring and Evaluation and results based management	

Language Proficiency

<p><i>Please rate your level of expertise based on the following ranking: 3 = Fluent; 2 = good working level; 1= some/basic; and Blank = no competence</i></p>				
Language	Read	Write	Speak	Understand

Name: _____

Email: _____

English Language Test

Test	Examining Institution	Date exam taken	Score obtained
TOFLE			
ILTS			
Other (provide detail)			

Please attached any records or certificates

Computer Skills

<p><i>Please rate your level of expertise based on the following ranking: 2 = proven competence; 1 = some experience; and Blank = no experience</i></p>			
MS Word		Internet	
Spreadsheets		Other – please include below:	
Databases			
PowerPoint			
E-Mail			

Name:

Email:

SECTION D. WORK EXPERIENCE

Please fill, starting with your present or most recent employer at the top, and insert new boxes as required.

Organisation		
Date	From	To
Your position		
Name of your line Manager		
Reason for leaving		
Outline of your responsibilities		
Key achievements/successes you contributed to		

Organisation		
Date	From	To
Your position		
Name of your line Manager		
Reason for leaving		
Outline of your responsibilities		
Key achievements/successes you contributed to		

Organisation		
Date	From	To
Your position		
Name of your line Manager		
Reason for leaving		

Name:

Email:

Outline of your responsibilities	
Key achievements/successes you contributed to	

Organisation		
Date	From	To
Your position		
Name of your line Manager		
Reason for leaving		
Outline of your responsibilities		
Key achievements/successes you contributed to		

SECTION F. References

Please give names, addresses and contact details of your current or most recent line manager as well as one previous manager who can comment on the quality of your work.

Name:	Name:
Address:	Address:
Telephone No:	Telephone No:
E-mail :	E-mail :

Name:

Email:

If any particulars given by you in this application are found to be false or if you deliberately leave out any relevant facts, any offer of employment may be withdrawn. Should such falsification come to light at any stage after an appointment you may be liable for dismissal.

I DECLARE THAT THE INFORMATION GIVEN ON THIS FORM IS CORRECT, THIS APPLIES TO APPLICATIONS SUBMITTED IN HARD COPY AND BY EMAIL.

Signed : _____ Date: _____

Name (in block capitals):

Instructions to submit your application

1. Save your completed form as: your family name your first name (e.g. Ayele_kebede)
2. Send completed application form by e-mail (please see the advert on local newspapers for the email address)
3. Hard copies of application form can also be submitted to Embassy of Ireland, P.O. Box 9585, Addis Ababa
4. Further information on the post is available on the Embassy's website: www.embassyofireland.org.et