



Please sign the
reverse.

Form No.

Local Authority	

- ◆ The recruitment procedure for Civil Defence will comply in full with the requirements of the Equal Status Acts 2000 – 2004 and the Data Protection Acts 1998 – 2003. Any information supplied will be treated accordingly.
- ◆ Civil Defence operates under the Air-Raid Precautions Acts of 1939 & 1946, the Civil Defence Acts 2002 & 2012 and the Local Government Acts 1941 – 2001.
- ◆ This application must be accompanied by suitable ID with photograph such as a driving licence or passport, a copy of which will be retained on file.
- ◆ Tá leagan Gaeilge den fhoirm seo ar fáil ach é a iarraidh.

Please complete in **BLOCK CAPITALS**

Mr / Mrs / Ms / Miss Forename: Surname:
Date of Birth:

Current Address:	<input type="text"/>	How long have you resided at your current address?	<input type="text"/>	<input type="text"/>
	<input type="text"/>		Yrs	Mths
	<input type="text"/>			
	<input type="text"/>			
Previous Address: (if any)	<input type="text"/>	Home Phone Number:	<input type="text"/>	
	<input type="text"/>	Work Phone Number:	<input type="text"/>	
	<input type="text"/>	Mobile Phone Number:	<input type="text"/>	
	<input type="text"/>	Email:	<input type="text"/>	

Next of Kin Details:

Name:	<input type="text"/>	Contact Phone Number:	<input type="text"/>
Address:	<input type="text"/>	Relationship to Applicant:	<input type="text"/>
	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>		

Your Occupation:		Employer's Address:	
Employer's Name:			
Qualifications:		Computer Skills:	

Driving Licence Details:

Do you hold a
current Driving
Licence?

Yes ☐

No ☐

If Yes:

Category	Type of Licence held		
	Full	First Provisional	Second Provisional
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Have you ever been convicted of a criminal offence?

Yes ☐

No ☐

If Yes, please
give details:

Have you ever applied for entry into the Defence Forces, An Garda Síochána or
Local Authority Fire Service?

Yes ☐

No ☐

If Yes, please
give details:

Have you ever been a member of Civil Defence?

Yes ☐

No ☐

If Yes, please
state which Local
Authority and your
reason for leaving:

Please outline your experiences with any other relevant organisations, if any:

Please list any relevant skill/experience which you possess that would be beneficial to Civil Defence:

	Y/N	If yes, please give further details
1. Trade skills	<input type="checkbox"/>	<input type="text"/>
2. Academic accomplishment	<input type="checkbox"/>	<input type="text"/>
3. Proficiency in languages	<input type="checkbox"/>	<input type="text"/>
4. Life skills	<input type="checkbox"/>	<input type="text"/>
5. Other	<input type="checkbox"/>	<input type="text"/>

Please tick as appropriate:

Yes

No

Will you make yourself available for necessary training at courses and for duty in an emergency?

☐
☐

Will you accept lawful requests given by superior officers?

☐
☐

Do you agree to abide by the current Civil Defence Code of Conduct and to any subsequent
amendments to the Code?

☐
☐

HEALTH STATUS

This declaration is strictly confidential. It is required for health & safety purposes and its aim is to protect all members of the organisation including the applicant. Details provided here may be taken into consideration when determining a members suitability for a particular Civil Defence activity.

ATTRIBUTES & REQUIREMENTS NECESSARY TO PERFORM THE FUNCTION OF A CIVIL DEFENCE VOLUNTEER

- Civil Defence is an inclusive organisation. If you can meet certain standard criteria, you may apply to join your local organisation. There are areas of Civil Defence services that may not demand high levels of personal fitness and stamina.
- Applicants are advised, however, that Civil Defence services are a second line emergency service and in some areas, the mental and physical demands on volunteers are the same as those demanded of full-time emergency service personnel. Volunteer admission to training and duty in such areas is subject to specific medical requirements and volunteers must maintain their fitness levels so that they can continue to satisfy these requirements while they remain active in these areas.
- The Civil Defence organisation has a duty of care to all its volunteers and to members of the public and must be satisfied that no one is put at avoidable risk as a result of the action/inaction of a volunteer. This duty includes taking measures to ensure that no one is put at risk by the inability of a volunteer to perform in any situation as a direct result of a known pre-existing medical condition or an inadequate personal fitness level.
- Applicants are asked to consider carefully and answer as accurately as possible the three questions listed below. The medical conditions listed have been drawn up in conjunction with the Medical Advisor to Civil Defence.
- Should you require further clarification with regard to the above you should discuss the matter with your Civil Defence Officer.

- | | | |
|------------------------------------|------------------------------|-----------------------------|
| 1 Do you suffer from Hypertension? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 2 Do you suffer from Asthma? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 3 Do you suffer from Epilepsy ? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

If you answered 'Yes' to any of the above questions or if you have any other condition that may affect your ability to perform the function of a Civil Defence Volunteer, please give further details:

Contact details for your doctor in the event of an emergency:

Name:	<input type="text"/>	Contact Phone Number:	<input type="text"/>
Address:	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>		

CONDITIONS OF SERVICE

1. The Local Authority may at any time, in accordance with Disciplinary Procedures approved by the Department of Defence, terminate a members service. Members are free to resign from the organisation at any time.
2. The minimum age limit is 18yrs.
3. Enrolment is for an initial probationary period of 12 months subject to satisfactory vetting by an Garda Síochána. Following satisfactory service a member may then sign on for a further 3 years. Membership will be reviewed every 3 years thereafter. Membership will be considered terminated should a member not make themselves available within a reasonable period for a review to take place.
4. Members are expected to attend at a local centre in their spare time for training. While the nature and extent of training will vary in the different sections of the services, members will normally be required to train for approximately two hours per week.
5. Training will normally be carried out in the area of the members own local authority. In some cases it may be necessary to carry out certain training in another area where advanced training facilities/equipment are available.
6. Certain benefits may be payable under a centrally held personal accident insurance policy and a statutory Personal Injuries Scheme in respect of death or injury sustained in the course of training or while on duty.
7. Members undergoing training will be under the control of their Civil Defence Officer or designated representative and must comply with all reasonable instructions in accordance with the Civil Defence Code of Conduct.
8. Upon termination of Civil Defence membership, all items of uniform and equipment issued must be returned to the Civil Defence Officer as soon as is practicable.

Please give the name of two referees. These people should be known to you but should not be related to you:

Name:

Address:

Contact Phone Number:

Name:

Address:

Contact Phone Number:

I declare that the particulars that I have provided on this application are true to the best of my knowledge. I have read and agree to fully abide by the conditions of service.

I hereby consent to Civil Defence submitting my personal details to An Garda Síochána for the purpose of Garda Vetting in advance of my taking up a position within the organisation and at a time or times within every five years thereafter so long as I occupy a position within the organisation.

Signature of Applicant:

Date:

Signature of Civil Defence Officer:
(or designated representative)

Date:

Membership Review Date: