

IRISH HOME CARE RESUME INSTRUCTIONS

Please ensure that you maintain the 'Verdana 10' font style and size for all text, other than your name and please delete all non-applicable items from your resume. Dates of employment must be stated as follows: '08 March 2012 to present', not '03/08/2012 to present'. Periods of education must be stated as 'June 2012 - March 2016' and not '06/2012 - 03/2016'. Please note that only an A4 size resume is accepted.

Please place here a recently taken, original colored photograph, with a white background.

PERSONAL INFORMATION

Name :
Current Address :
Mobile Number :
WhatsApp Number : **Mandatory**
E-mail Address : **Must be a personal e-mail address**
MS Teams Display Name: **Mandatory**
Age :
Date of Birth :
Gender :
Civil Status :

EDUCATION

If you have begun, but not have not yet completed any higher educational course, such as a Master's Degree, please delete this section on your resume.

MASTER'S DEGREE

Degree:

University:

Full Address:

Period Attended: **From Month/Year to Month/Year**

Date of Graduation: **Day/Month/Year**

COLLEGE

Diploma:

Name of University:

Full Address:

Period Attended: **From Month/Year to Month/Year**

Date of Graduation: **Day/Month/Year**

SECONDARY

Name of School:

Full Address:

Period Attended: **From Month/Year to Month/Year**

Name of School:

Full Address:

Period Attended: **From Month/Year to Month/Year**

ELEMENTARY

Name of School:

Full Address:

Period Attended: **From Month/Year to Month/Year**

Name of School:

Full Address:

Period Attended: **From Month/Year to Month/Year**

DELETE ANY OF THE ABOVE SECTIONS WHICH ARE NOT BEING UTILIZED

ORGANIZATIONAL AFFILIATIONS, IF ANY:

WORK HISTORY FROM THE PRESENT DATE DOWN TO THE DATE OF GRADUATION

Name of Employer:

Full Address:

Job Title:

Period of Employment: **From Day/Month/Year to Day/Month/Year**

Brief summary of work performed:

Name of Employer:

Full Address:

Job Title:

Period of Employment: **From Day/Month/Year to Day/Month/Year**

Brief summary of work performed:

ADD MORE EMPLOYERS AS REQUIRED

EXPLANATION OF GAPS IN EMPLOYMENT HISTORY GREATER THAN SIX MONTHS

If none mark 'N/A'

TYPES OF PATIENT CASES HANDLED – A BRIEF SUMMARY FROM ALL EMPLOYMENT EXPERIENCES:

RELEVANT TRAINING RECEIVED:

RELEVANT SEMINARS ATTENDED:

NON-PROFESSIONAL CAR DRIVER'S LICENSE DETAILS:

License No.:

Date of Issue: **Day/Month/Year**

Date of Expiration: **Day/Month/Year**

DL Codes: **For example: 2, 4, B**

You must confirm on your resume that you are an experienced driver

PROFESSIONAL REFERENCES:

Name:
Job Title:
Name of Organization:
Mobile No.:
E-mail Address:

WE REQUIRE TWO PROFESSIONAL REFERENCES.
YOUR REFERENCES MUST BE FROM THE WORK HISTORY PLACED ON YOUR RESUME AND MUST BE FROM AN INDIVIDUAL WHO SUPERVISES OR HAS SUPERVISED YOUR WORK.

Name:
Job Title:
Name of Organization:
Mobile No.:
E-mail Address:

PLEASE DO NOT LEAVE LARGE BLANK SPACES BETWEEN THE VARIOUS SECTIONS OF YOUR RESUME. PLEASE MAKE SURE TO EDIT YOUR RESUME PROFESSIONALLY, BEFORE SUBMISSION.

IMPORTANT NOTE REGARDING THE AUTHENTICITY OF THE INFORMATION YOU PLACE ON YOUR RESUME:

Please note that any significant information placed on your resume which is subsequently determined not to be an authentic and accurate representation of your qualifications and/or experience, will result in the immediate cancellation of your application.

DO NOT FORGET TO ALSO E-MAIL YOUR COMPLETED, SIGNED AND DATED PDF QUESTIONNAIRE!