Foirm Iarrtais i gCóir Oibrí Deonacha - ÓGRAS
ÓGRAS - Application Form for Volunteers

Ainm/Name: _____

Seoladh/Address: _____

_____

_____

Uimh. Fón/Phone No. _____

Dáta Breithe/Date of Birth: ___/___/___ **Áit Breithe**/Place of Birth: _____

Obair/Occupation: _____

Cén fáth gur mhaith leat a bheith i do cheannaire óige? / Why do want to be a Youth Leader?:

_____

_____

Tabhair sonraí maidir leis an oideachas/oiliúint in obair óige nó pé tathaí atá agat le imeachtaí / grúpaí óige. Give details in relation to education/training in youth work or any experience you had involving youth events / youth clubs previously.

_____

_____

_____

_____

An bhfuil míchumas nó galar ort gur féidir chur as duit agus túsa i mbun obair le daoine óga? Má tá, tabhir sonraí le do thoill. Do you suffer due to disability or a disease that could interfere at times with your ability to work with young people? If so please give details.

_____

_____

_____

_____

Na huaireanta a bheas tú ar fáil (cur tic ag na hamanna cuí) / The hours that you will be available (please tick the times that you will be available)

Am Time	**Luain** Monday	**Máirt** Tuesday	**Céadaoin** Wednesday	**Déardaoin** Thursday	**Aoine** Friday	**Satharn** Saturday	**Domhnach** Sunday
Maidin Morning **Tráthnóna** Evening **Oíche** Night							

Tabhair ainm, seoladh agus uimhir fón i gcóir beirt (nach bhfuil gaolta leat) atá aithne maith acu ort chun moladh a thabhairt dúinn. / Please give a name, address and phone number of two people (that you are not related to), that you know very well who would be able to supply us with a character reference:

Ainm/Name: _____

Seoladh/Address: _____

Uimh. Fón/Phone No: _____

Ainm/Name: _____

Seoladh/Address: _____

Uimh. Fón/ Phone No: _____

Dearbhaím nach bhfuil aon rud i'm chúlra phearsanta nó proifisiúnta atá mí-oiriúnach domsa a bheith ag obair le daoine óga. - I confirm that there is nothing in my personal or professional background that would make me unsuitable for working with young people.

Tá an t-eolas ar fad atá tugtha agam cruinn agus táim sásta cloí leis na coinnealacha a bhainean le ballraíocht/rannpháirtíocht. - I confirm that the information given above is accurate and that I am willing to adhere to the membership/participation terms and conditions.

Siniú/Signed: _____

Dáta/Date: _____

Don Oifig Amháin

Fón: **Cuairt:** **Litir:**

Dearbhaithe ag: _____

Dáta: