**PORTAFERRY REGERATION LIMITED**

**TEMPORARY PART-TIME OFFICE ADMINISTRATOR**

# **Personal Details**

Surname:

Forename(s):

Address:

Telephone Number:

Email address:

# **Declaration**

The particulars given on this form are complete and correct to the best of my knowledge and belief.

SIGNED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### Completed forms should be sent by email to info@portaferryregeneration.com no later than Fridy 16th December.

### Essential Criteria

# **You must demonstrate in this form, how, and to what extent, you meet the essential criteria as detailed in the job description and personnel specification.**

**Qualifications**

Please confirm whether you have a minimum of 5 GCSEs or equivalent at grade A-C including maths and English.

Delete as appropriate\*

**\*Yes \*No**

Please demonstrate in the boxes below:

1. One year’s experience in a busy office environment.

**Please include relevant dates**

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|  |

1. Excellent interpersonal, organisational and time management skills.

**Please include relevant dates**

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1. Ability to multitask, prioritise and work on your own initiative.

**Please include relevant dates**

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|  |

1. Evidence of strong written and numerical skills and Microsoft proficiency

**Please include relevant dates**

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