



Christmas Casuals – HGV Drivers - Dublin

Dear Sir/Madam

Should you wish to be considered for casual employment this Christmas, please complete and submit the following application forms **with all required supporting documents (listed below)** via email to xmascasuals@anpost.ie by **09th October 2020**.

Accompanying your completed application forms please ensure to attach the following requisite documents:

1. Copy of Your Valid Driving Licence C or CE and up to date CPC Accreditations
2. Valid Photo ID (Drivers Licence or Passport)
3. One Recent JPEG Passport Sized Photo
4. Proof PPS Number
5. Proof of Address
6. GNIB (if applicable)
7. If you are a non EEA Citizen, you must provide a valid work permit.
8. If you have resided outside Ireland within the past 10 years must supply security clearance from that particular jurisdiction.
9. **Completed Garda eVetting Invitation Form** (linked to Job Advert on our Careers Page).

Please Note The Following:

- All relevant sections of Garda eVetting Invitation Form must be completed and signed. The completed form must to be submitted as requested with a copy of your valid Photo ID (Drivers Licence or Passport).
- **YOU WILL RECEIVE AN EMAIL TO COMPLETE GARDA eVETTING ONLINE AND MUST COMPLTE THE PROCESS IMMEDIATELY AS WE WILL NOT RESET ACCESS ONCE EXPIRED.**
- Please ensure that your **PPS number** is included on the relevant section of the application form.
- **Failure to complete these forms will result in applications being rejected and your name will be removed from our database.**
- Identification will be required to be worn at all times by successful candidates.
- For Health & Safety reasons you **must** wear safety footwear at all times while at work.
- Payments will be by via Bank Account only as per last year and pay dates will be supplied at a future date. For candidates who have previously undertaken this temporary seasonal work at An Post a **Payroll Mandate Form** is available on request if your bank details have changed.

Yours sincerely,
An Post HR Services Unit

NB: THESE FORMS MUST ONLY BE COMPLETED BY THE APPLICANT



REMINDER:

Please ensure to submit **ONE** recent Jpeg passport sized photograph with your application.

APPLICATION FOR TEMPORARY CHRISTMAS EMPLOYMENT 2020

1. Surname: _____

2. First Names: (in full) _____

3. Address: _____

4. Date of Birth: _____

5. Telephone No: _____

Shoe Size

6. P.P.S. No. (Attach copy of proof of PPS) _____

7. Email address _____

8. Have you been employed by An Post previously: _____ Staff No _____

9. Where did you work _____ What year _____

10. State precise dates you are available from to start work: _____

ALL THE ABOVE FIELDS MUST BE COMPLETED

I confirm that the above information is true and correct and that any mis-information given will disqualify my application or may result in my dismissal if employed by An Post. I am not aware of any circumstances which, if known to An Post, might cause the Company to question my suitability for employment.

APPLICANT'S SIGNATURE: _____ DATE: _____



CASUAL FITNESS DECLARATION 2020

Name: _____ Date of Birth: _____

Address: _____ Contact Number: _____

_____ Email: _____

Location: _____ Job Title: _____

Please answer all the questions below by ticking (✓) the appropriate box. No clinical details are required. *You may, if you wish, opt to complete a confidential 'Pre employment Health Declaration form', the details of which will only be available to the Occupational Health & Support of An Post.*

Do you have or have you had a difficulty with any of the following:

- (a) Standing
- (b) Lifting
- (c) Communicating with people
- (d) Walking
- (e) Shift work
- (f) Night Work (i.e. between 12 midnight and 7.00 am)
- (g) Wearing of safety boots

Do you have a history of neck, knee or back trouble? _____

Are you taking any medicine which may interfere with your ability to drive, ride a bicycle and work safely with machinery? _____

In relation to **any and all of the above** tick the following single box for YES or NO:

No	<input type="checkbox"/>
Yes	<input type="checkbox"/>

If yes to any of the above please complete a 'Pre employment Health Declaration form' which can be obtained from the An Post HR Department (via xmascasuals@anpost.ie) and additional information shall be held in strictest confidence by our An Post Occupational Health Services.

If no to the above questions, this completed form will be kept by HR.

DECLARATION

I DECLARE that the information I have given for this Christmas Casual Fitness Declaration is true and complete to the best of my knowledge and that I have not withheld any material facts.

I understand that I am responsible for the accuracy of my statements and that if I suppress any information that my employment may be terminated.

Name: _____

Signed: _____

Witness: _____