Logo, company name

Description automatically generated**FARM RELIEF SERVICE**

**OPERATOR**

|  |  |
| --- | --- |
| **OFFICE USE ONLY** | |
| **Contract** |  |
| **Insight** |  |
| **Payroll** |  |
| **ROS** |  |

**APPLICATION FORM**

**APPLICANTS NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Eircode \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**DATE OF BIRTH: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**DRIVERS LICENCE**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Full** | **Class** | **Provisional** | **Years held** |
| **Car (Drivers Licence)** |  |  |  |  |
| **Tractor (Learner permit)** |  |  |  |  |
| **Quad (Training cert)** |  |  |  |  |

**MOBILE No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**LANDLINE No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Attach**

**PPS NO. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Photo**

**E MAIL ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Here**

**FARMING KNOWLEDGE: Please tick**

**DAIRY BEEF TILLAGE SHEEP PIGS HORTICULTURE MACHINERY**

**REFEREES : NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_CONTACT No. \_\_\_\_\_\_\_\_\_\_\_**

**NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_CONTACT No. \_\_\_\_\_\_\_\_\_\_\_\_**

**NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CONTACT No.\_\_\_\_\_\_\_\_\_\_\_\_**

**FARM ENTERPRISE KNOWLEDGE:**

Dairy- milking

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | No Experience | Experience with some assistance | Experience unassisted | Highly experienced |
| Milked in herringbone parlour |  |  |  |  |
| Milked in rotary parlour |  |  |  |  |
| Assisted with robot milking parlour |  |  |  |  |
| The use of refrigerate milk storage tanks |  |  |  |  |
| Begun a routine wash of a refrigerated milk storage tank |  |  |  |  |
| Washing milk plant and equipment. |  |  |  |  |
| Have you used and mixed chemicals in a milking plant. |  |  |  |  |
| Identifying and treatment mastitis |  |  |  |  |

Dairy- Farm work

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | No Experience | Experience with some assistance | Experience unassisted | Highly experienced |
| Administering injections (subcutaneous /intramuscular) |  |  |  |  |
| Administering drenches |  |  |  |  |
| Heat Detection/ Breeding identification |  |  |  |  |
| Supervising and calving assistance |  |  |  |  |
| Grassland management |  |  |  |  |

Dairy- Calves

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | No Experience | Experience with some assistance | Experience unassisted | Highly experienced |
| Tagging calves |  |  |  |  |
| Disbudding/dehorning |  |  |  |  |
| Feeding calves using teat feeders |  |  |  |  |
| Feeding calves using automatic feeders |  |  |  |  |
| Mixing milk replacer to feed |  |  |  |  |

Machinery

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | No Experience | Experience with some assistance | Experience unassisted | Highly experienced |
| Tractor driving |  |  |  |  |
| Feeding Grass/Maize silage with front loader |  |  |  |  |
| Using a TMR diet feeder |  |  |  |  |
| Spreading fertiliser using a tractor |  |  |  |  |
| Topping fields/ Mower silage |  |  |  |  |
| Slurry spreading with tractor |  |  |  |  |
| Quad driving |  |  |  |  |
| Sprayer use |  |  |  |  |

**BANK DETAILS:**

BANK ACCOUNT No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SORT CODE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

BIC \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ IBAN \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Return To: FRS Cahir Carrigeen Industrial Est. Cahir Co Tipperary

052 7441598 [rcarey@frscahir.ie](mailto:info@frscahir.ie)

DECLARATION:

I declare that all information I have provided on this form is accurate and true.

I have no medical condition which would hinder me in my role of dairy farm worker, or which would prevent me from carrying out any task as part of this role.

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| **OFFICE USE ONLY** | **Yes** | **No** |
| Skills Assessment form completed by applicant |  |  |
| Interviewed by Phone |  |  |
| Interviewed in Person |  |  |
| CV Provided |  |  |
| References Provided |  |  |
| References Checked |  |  |

|  |  |
| --- | --- |
| **Interviewed by** |  |
| **Interview Date** |  |