

**Panel of Trainers & Mentors for West Limerick Resources (WLR)   
Social Inclusion & Community Activation Programme (SICAP)**

**West Limerick Resources Social Inclusion & Community Activation Programme (SICAP)** is looking to form a panel of experts to support the delivery of certain SICAP activities. We are looking for professional trainers & mentors with skills and experience in the following six thematic areas.

|  |  |
| --- | --- |
| **Digital Skills**   * IT – Basic Computer/tablet/smart phone skills * Social Media – awareness raising & training of the various social media platforms for individuals and groups. * Digital Innovation for Local Community Groups and Social Enterprise to promote ongoing activities using various digital platforms. * Marketing & Communications | **Community Development**   * Facilitate Community Needs Analysis & Surveys * Deliver Training & Develop Policies for LCGs (including maintaining accounts, fundraising skills, child protection) * Creative Arts/Music Practitioners to deliver programmes to LCGS (for future Choir/Arts Programmes with LCGs) |
| **Self-Employment & Enterprise Supports**   * Business Planning & Strategic Planning * Financial Management * Basic Bookkeeping Skills * Marketing & Social Media * Health & Safety | **Personal Development & Wellbeing**   * Craft/Art * Music * Food & Nutrition * Yoga/Tai Chi * Confidence Building |
| **Social Enterprise**   * Business Planning & Strategic Planning * Financial Management & Payroll * HR & People Management * Income Generation (incl. Fundraising) * Governance * Internal Communications * Leadership * Event Planning & Management * Networking Skills | **Family Support**   * Speech and Language Facilitation * Online Parenting Supports * Digital Supports for Parents * Music/Arts Fun Facilitators for children |

Virtual Interviews for those shortlisted will take place week commencing March 8th, 2021.

CANVASSING BY OR ON BEHALF OF THE APPLICANT WILL AUTOMATICALLY DISQUALIFY

Please return this form along with your CV to:

Dearbhla Conlon, Ahern, SICAP Co-ordinator by email to dconlon@wlr.ie

**Closing date: 5PM Friday 26th February 2021**

**Please note that securing a place on the Panel of Trainers & Mentors is not a guarantee of hours.**

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**SICAP EXPRESSION OF INTEREST FORM**

**APPLICANT DETAILS**

First Name Click or tap here to enter text.

Surname Click or tap here to enter text.

Address Click or tap here to enter text.

Contact Details

Mobile Click or tap here to enter text.

Other Click or tap here to enter text.

Email Click or tap here to enter text.

**SKILLS IDENTIFICATION**

Please identify the skills under each Thematic area in which you have experience.

Click on box to mark with an x all relevant skills/experience.

**DIGITAL SKILLS**

IT – Computer/Tablet/Smart Phone

Social Media

Digital Innovation for Local Community Groups/Social Enterprise

Marketing & Communications

Other (Please give details) Click or tap here to enter text.

**COMMUNITY DEVELOPMENT**

Community Needs Analysis & Surveys

Training & Policy Development for LCGs

Digital Innovation for Local Community Groups & Social Enterprise

Creative Arts / Music Practitioners to deliver programmes to LCGs

Income Generation (incl. Fundraising)

Other (Please give details) Click or tap here to enter text.

**SOCIAL ENTERPRISE**

Business Planning & Strategic Planning

Financial Management & Payroll

HR & People Management

Income Generation incl. Fundraising

Governance

Networking Skills

Other (Please give details) Click or tap here to enter text.

**SELF EMPLOYMENT & ENTERPRISE SUPPORTS**

Business Planning & Strategic Planning

Financial Management & Payroll

Basic Bookkeeping Skills

Marketing & Social Media

Health & Safety

Start Your Own Business Training

Other (Please give details) Click or tap here to enter text.

**PERSONAL DEVELOPMENT & WELLBEING**

Art & Craft

Music

Food & Nutrition

Yoga/Tai Chi/Mindfulness

Confidence Building

Other (Please give details) Click or tap here to enter text.

**FAMILY SUPPORT**

Speech & Language Facilitation

Online Parenting Supports

Digital Supports for Parents

Music/Arts Fun Facilitators for Children

Other (Please give details) Click or tap here to enter text.

**QUALIFICATIONS/EXPERIENCE** Click on box to mark with an x

Do you have a recognised training qualification? e.g. JEB, Train the Trainer, Teaching Qualification, GTC.  
Copies of certified qualifications may be requested at a later date.

Yes  No

Please list training qualifications  
 Click or tap here to enter text.

Do you have a qualification at Level 7/8 on the National Framework of Qualifications or its equivalent, and/or significant relevant work experience in your chosen area(s) of expertise?

Yes  No

Please list below

Click or tap here to enter text.  
Date awarded Click or tap here to enter text.

Click or tap here to enter text.  
Date awarded Click or tap here to enter text.

Click or tap here to enter text.  
Date awarded Click or tap here to enter text.

Click or tap here to enter text.  
Date awarded Click or tap here to enter text.

Have you previously delivered training & mentoring supports in a social enterprise/community & voluntary environment?

Yes  No

Briefly list any courses/workshops you have delivered and who these were delivered to

Click or tap here to enter text.

Have you previously worked with other Local Development Companies and the SICAP programme?

Yes  No

If yes, please list below

Click or tap here to enter text.

Have you a working knowledge of West Limerick Resources and the SICAP programme?

Yes  No

If yes, please list below

Click or tap here to enter text.

Please outline your experience in relation to your chosen area(s) of expertise.

Click or tap here to enter text.

Please outline your understanding of the needs of individuals & groups supported under the WLR SICAP programme and how you might support them through training and mentorship.

Click or tap here to enter text.

Do you hold a full driving licence?  Yes  No

Do you have access to a car?  Yes  No

Do you have the ability to deliver training & mentoring?

1. in person in the West Limerick area  Yes  No
2. using digital & virtual platforms  Yes  No

If delivering supports using virtual platforms, which platforms do you intend to use.

Click or tap here to enter text.

**FINANCIAL DETAILS**

Please outline the rates which you intend to charge WLR SICAP for the delivery of any training or mentoring supports which you wish to offer. Please clarify if this is per hour or per session. If per session, please state how long an average session takes. Also, please clarify if this rate is inclusive or exclusive of VAT and at what rate VAT will be charged if applicable.

Click or tap here to enter text.

Are you registered as self-employed with the Office of the Revenue Commissioners?  Yes  No

If yes, please provide a copy of your most recent Tax Access Identification Number (TAIN)  
 Click or tap here to enter text.

Do you have insurance for your business?  Yes  No

Please clarify which type of insurance and please attach a current copy of your Insurance Certificate in return email

Click or tap here to enter text.

**REFEREES**

Please provide the names of two persons as referees for confirmation of previous work experience

Name Click or tap here to enter text.

Organisation Click or tap here to enter text.

Address Click or tap here to enter text.

Tel/Mobile Click or tap here to enter text.

Email Click or tap here to enter text.

Name Click or tap here to enter text.

Organisation Click or tap here to enter text.

Address Click or tap here to enter text.

Tel/Mobile Click or tap here to enter text.

Email Click or tap here to enter text.

**SIGNATURE**

Before signing this form please ensure that you have replied fully to all questions.

I, the undersigned, HEREBY DECLARE, all the foregoing details to be true.

Signature of Applicant Click or tap here to enter text.

Date Click or tap here to enter text.