Musica Kirklees JOB APPLICATION FORM



Position applied for (please give	
exact job title as advertised)	
Instrument/s offered	
(please include <u>curriculum music</u> if	
appropriate)	

PERSONAL DETAILS

Title (circle as appropriate)	Mr	Mrs	Miss	Ms	Dr	Other	
Surname							
Forenames							
Previous Name / Maiden Name							
Home Address Including postcode							
Telephone Numbers	Home			Mobile			
Email address							
National Insurance Number							
Nationality							
Are you the holder of a current l	JK Driving	Licence?		YES	/ NO		
Type of Driving Licence?							
Do you have access to a car?				YES ,	YES / NO		
Do you hold Enhanced DBS clearance?				YES ,	/ NO		
Do you have current subscriptio	3S update	service?					
How did you find out about this	vacancy?						

PRESENT EMPLOYMENT

School / Place of E	mployment?				
School / Place of				Tel. No	
Employment?				Tel. NO	
Employing Authori	ity				
(if a school)					
Post Held / Job				Date of	
Title				Appointment	
Salary	£	p.a		Scale / Grade	
Main Tasks and					
Responsibilities					
Reason for leaving (if			Date em	ployment	
applicable)			ended (i	f applicable)	

PREVIOUS OCCUPATIONAL HISTORY

Da	ates	Employer	Name of	Position Held	Salary	Part / Full Time
From	То	Linpioyei	Establishment	POSILION HEIU	Salary	Full Time

REFEREES:

You are invited to name two referees, at least one of whom must be qualified to comment on your performance at work. (This will usually be your present or most recent employer)

Your referees will be automatically contacted if you are selected for interview.

	First	Second
Name		
Address		
Occupation		
Phone Number		
Email Address		

EDUCATION AND QUALIFICATIONS

Perio Course i if F/T		Name of Schools, Colleges, Universities	Degree or Certificate	Date Awarded	Subjects taken with grades obtained where appropriate
From	То	Attended			appropriate

Details of training courses attended during the last five years (most recent first)

Organising Body	Subjects and other Details	Dates		
	Subjects and other Details	From	То	

Other Relevant Experience (e.g. Youth Work)

Details	Dates		
Details	From	То	

MEDICAL

Are you aware of any Medical Condition which could affect your performance at work?		
If you answered yes, please supply brief details		
If you are Registered Disabled, please quote R.D.P. No. YE	S / NO	
Please state the nature of disability		

OTHER INFORMATION

Have you previously been employed by Musica Kirklees?		YES / NO	
If you answered yes please give details (if not already outlined in this application)			
Have you other paid employment e.g consultancy, session or part time work, self-employment?	YES ,	/ NO	
If you answered yes please give details (including hours worked)			

CRIMINAL CONVICTIONS: PLEASE GIVE DETAILS OF ALL CONVICTIONS/CAUTIONS. **If None, please** state "NONE".

Date	Details of Offence	Sentence

REHABILITATION OF OFFENDERS ACT

Because of the nature of the work for which you are applying, this post is exempt from the provisions of Section 4(2) of the Rehabilitation of Offenders Act 1974 by virtue of the Rehabilitation of Offenders Act 1974 (Exemptions) order 1975. Applicants are, therefore, not entitled to withhold information about convictions which for other purposes are "spent" under the provisions of the Act, and, in the event of employment, any failure to disclose such convictions could result in dismissal, or disciplinary action by the Employer. Any information given will be completely confidential and will be considered only in relation to an application for positions to which the Order applies.

Having read the above paragraph, I certify that I have declared all cautions and convictions on this application form as outlined above.

	5		 	
Signed:				

(Please list any special skills you have which you think may be useful in your work)

FURTHER INFORMATION

You are invited to supply briefly any additional information in support of your application using the space below and overleaf.

<u>Please include information about your current approach to, and involvement with, teaching,</u> <u>performing and directing music</u> Please indicate by entering yes or no in the boxes below to confirm your availability during school term time.

	AM	РМ	Evening
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday		n/a	n/a

I declare that the particulars given are correct and I have not withheld any facts which might unfavourably affect my application. I am aware that to withhold or falsify information could result in disciplinary action. I agree to a medical examination if necessary.

Date:		Signed:	
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Musica Kirklees is an Equal Opportunities Employer

Please forward completed form to: Niki Matthews (PA to the Principal) Musica Kirklees 9 Beast Market, Huddersfield, HD1 1QF Email: <u>niki.matthews@musicakirklees.org</u>