|  |  |
| --- | --- |
| Position applied for (please give exact job title as advertised) |  |
| Instrument/s offered  (please include curriculum music 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 UK Driving Licence? | | | | | YES / NO | | |
| Type of Driving Licence? | | | | |  | | |
| Do you have access to a car? | | | | | YES / NO | | |
| Do you hold Enhanced DBS clearance? | | | | | YES / NO | | |
| Do you have current subscription to the DBS update service? | | | | |  | | |
| How did you find out about this vacancy? | | | | |  | | |

PRESENT EMPLOYMENT

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| School / Place of Employment? | | | |  | | | |
| School / Place of Employment? |  | | | | Tel. No | |  |
| Employing Authority  (if a school) | | |  | | | | |
| Post Held / Job Title |  | | | | Date of Appointment | |  |
| Salary | £ p.a | | | | Scale / Grade | |  |
| Main Tasks and Responsibilities |  | | | | | | |
| Reason for leaving (if applicable) | |  | | Date employment ended (if applicable) | |  | |

**PREVIOUS OCCUPATIONAL HISTORY**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Dates | | Employer | Name of Establishment | Position Held | Salary | Part / Full Time |
| From | To |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

**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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Periods of Course indicate if F/T or P/T | | Name of Schools, Colleges, Universities Attended | Degree or Certificate | Date Awarded | Subjects taken with grades obtained where appropriate |
| From | To |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
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|  |  |  |  |  |  |

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

|  |  |  |  |
| --- | --- | --- | --- |
| Organising Body | Subjects and other Details | Dates | |
| From | To |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Other Relevant Experience** (e.g. Youth Work)

|  |  |  |
| --- | --- | --- |
| Details | Dates | |
| From | To |
|  |  |  |

###### MEDICAL

|  |  |  |
| --- | --- | --- |
| Are you aware of any Medical Condition which could affect your performance at work? | | YES / NO |
| If you answered yes, please supply brief details | | |
| If you are Registered Disabled, please quote R.D.P. No. | YES / 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.

|  |  |
| --- | --- |
| Signed: |  |

**INTERESTS**

|  |
| --- |
| (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.  **Please include information about your current approach to, and involvement with, teaching, performing and directing music** |
|  |

**Availability**

Please indicate by entering yes or no in the boxes below to confirm your availability during school term time.

|  |  |  |  |
| --- | --- | --- | --- |
|  | **AM** | **PM** | **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: |  |

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:* [*niki.matthews@musicakirklees.org*](mailto:niki.matthews@musicakirklees.org)