Musica Kirklees JOB APPLICATION FORM



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

PERSONAL DETAILS

					1	
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,	/ 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 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	Salany	Part / Full Time
From	То	Employer	Establishment	Position neid	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

Course	ods of indicate or P/T	Name of Schools, Colleges, Universities	Degree or Certificate	Date Awarded	Subjects taken with grades obtained where
From	То	Attended			appropriate

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

Organising Rody	Subjects and other Details	Dates		
Organising Body		From	То	

Other Relevant Experience (e.g. Youth Work)

Details	Dates	
	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. 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 applica-	tion)	
Have you other paid employment e.g consultancy, session or part time work, self-employment?		
If you answered yes please give details (including hours worked)		

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

Details of Offence	Sentence
	Details of Offence

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

Order applies.	
Having read the above pa application form as outlin	aragraph, I certify that I have declared all cautions and convictions on this ed above.
Signed:	
INTERESTS	
(Please list any special sk	ills you have which you think may be useful in your work)
the space below and ove	ion about your current approach to, and involvement with, teaching,

confidential and will be considered only in relation to an application for positions to which the

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.

|--|

Musica Kirklees is an Equal Opportunities Employer

Please forward completed form to: Niki Matthews (PA to the Principal)

Email: niki.matthews@musicakirklees.org