

TEACHER POOL APPLICATION FORM

please post completed forms to Niki Matthews (PA to the Principal),
Musica Kirklees, 9 Beast Market, Huddersfield, HD1 1QF
or email to niki.matthews@musicakirklees.org

Instrument/s offered (please include <u>curriculum music</u> if appropriate)	
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PERSONAL DETAILS

Title (circle as appropriate)	Mr	Mrs	Miss	Ms	Dr	Other
Surname						
Forenames						
Home Address Including postcode						
Telephone Numbers	Home		Mobile			
Email address						

Former name (if applicable)		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?		YES / NO	
Where did you see this position advertised?			

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)		
	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				

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:	
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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.
<u>Please include information about your current approach to, and involvement with, teaching, performing and directing music</u>

Availability

Please indicate by either ticking (if available) or crossing out (if not available) 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:	
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Musica Kirklees is an Equal Opportunities Employer

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