

All information you provide on this form is protected under the Data Protection Act 2002 and the Employment Practices Data Protection Code of Practice.

POSITION APPLIED FOR: _____

Where did you hear about this post? _____

PERSONAL DETAILS

Title (Prof/Dr/Mr/Ms/Mrs/Miss/Other): _____

First name (s): _____

Last name: _____

Address: _____

Postcode: _____

Nationality: _____ Date of Birth: _____

Home tel: _____ Mobile: _____

Email: _____

We may need to contact you with regard to this vacancy,
please state your preferred method: _____

National Insurance Number? _____

Do you have a full UK driving licence? Yes No

Do you have use of a vehicle? Yes No

EDUCATION AND QUALIFICATIONS**SECONDARY EDUCATION**

Name of School	Dates attended	Subject and qualification obtained, include grade and level.

HIGHER AND FURTHER EDUCATION

Name of Institution	Dates attended	Subject and qualification obtained, include grade and level.

OTHER RELEVANT QUALIFICATIONS

Name of Institution	Dates attended	Subject and qualification obtained, include grade and level.

MEMBERSHIP OF PROFESSIONAL BODIES

Body: _____ Level of membership: _____

EMPLOYMENT DETAILS

Please work backwards starting with your current or last employer, use a continuation sheet if necessary.

Employer's name and address:	Dates from and to:	Job title and broad outline of duties and responsibilities:

REFERENCES

Please nominate two referees.

1. Name: _____

Address: _____

_____ Postcode: _____

Telephone: _____

Email address: _____

Title/Position: _____ Relationship to applicant: _____

Please tick this box if this referee is not to be contacted before interview.

2. Name: _____

Address: _____

_____ Postcode: _____

Telephone: _____

Email address: _____

Title/Position: _____ Relationship to applicant: _____

Please tick this box if this referee is not to be contacted before interview.

Please note that an offer of employment cannot be made without prior receipt of satisfactory references, one of which should be your present or most recent employer.

DISABILITY AND HEALTH PROBLEMS

The Disability Discrimination Act 1995 defines a disabled person as someone who has a physical or mental impairment which has a substantial and adverse long-term effect on his or her ability to carry out normal day-to-day activities.

I consider myself Disabled Non disabled

Please indicate below if you require any reasonable adjustments, due to a disability or health condition, to enable you to attend an interview, or which you wish us to take into account when considering your application.

DISCLOSURE SERVICE

All Music Academy for Schools staff are required to hold a Disclosure Certificate from the Criminal Records Bureau. The certificate is proof that the individual concerned does not have any previous convictions under the Rehabilitation of Offenders Act 1974 which could be relevant to their work with Music Academy for Schools LLP. Additional information is available from the CRB website (www.crb.gov.uk)

REHABILITATION OF OFFENDERS

Under the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975, applicants for teaching posts are among those who are not entitled to withhold information about any previous criminal convictions. You are therefore required to answer the following question:

Have you ever been convicted of a criminal offence? Yes No

If you answered yes, please send particulars by post in a letter marked 'Personal – for the Director of Music Academy for Schools only'.

DATA PROTECTION

In accordance with the Data Protection Act 2002 and the Employment Practices Data Protection Code of Practice, the information you provide on this form will be used only in connection with your application for employment and will not be released to anyone who does not require it for this purpose.

When you sign and return this form you are giving permission to process and hold the information you have supplied on it, including information you consider as personal and sensitive. If your application is unsuccessful the information will be kept for a maximum of 6 months and then destroyed.

The Equal Opportunities form will be treated separately from this application form and will be available to Human Resources staff only for monitoring purposes.

DECLARATION

I declare that to the best of my knowledge the information given on this form is accurate and that I have not omitted any facts which may have any bearing on my application. I understand that falsification or qualification or any other information may lead to the withdrawal of any offer of employment, or dismissal where employment has already commenced.

I give my consent to Music Academy for Schools LLP for making such reasonable enquiries as it thinks fit in respect of the information and details given in this form.

Signed: _____ Dated: _____

HOW TO APPLY

1. Send this form, a completed Monitoring and Equality Form, a covering letter and CV to Mr Robert Murray, Music Academy for Schools LLP, Stapenhill Fields Farm, Rosliston Road South, Drakelow, Burton-upon-Trent. Staffs. DE15 9UE.
2. Fax this form, a completed Monitoring and Equality Form, a covering letter and CV to 01283 544888

Your application will be acknowledged. We regret, however, that we are unable to notify applicants individually of the result of selection. Applicants should assume that they have not been shortlisted for interview if they have not been contacted within three weeks of the closing date.

MONITORING FOR EQUALITY

It would really help us if you could complete this section for us. Music Academy for Schools LLP is committed to equality of opportunity in employment and service delivery and the information you provide will help us to ensure fair and equal treatment of applicant and employees alike.

The data will be used strictly for statistical and monitoring purposes only. The completed monitoring form will be separated from the application and will not be seen or used during the selection process. Your data will be stored electronically and will remain strictly confidential to the Human Resources Department. No personal information such as your name and address will be released when reporting statistical data.

THANK YOU – ALL QUESTIONS ARE OPTIONAL

Please indicate your ethnic group?

White

- English/Welsh/Scottish/Northern Irish/British
- Irish
- Any other White background

Mixed/multiple ethnic groups

- White and Black Caribbean
- White and Black African
- White and Black Asian
- Any other Mixed/multiple ethnic background

Asian / Asian British

- Indian
- Pakistani
- Bangladeshi
- Chinese
- Any other Asian background

Black / African / Caribbean / Black British

- African
- Caribbean
- Any other Black/African/Caribbean background

Any other ethnic group (specify if you wish)

What is your gender?

- Male
- Female
- Other

Which of the following options best describes how you think of yourself?

- Heterosexual / Straight
- Gay, Lesbian or Bisexual
- Other
- Prefer not to say

What age bracket are you in?

- 16-24
- 25-34
- 35-44
- 45-54
- 55-64
- 65+
- Prefer not to say

The Disability Discrimination Act 1995 defines a disabled person as someone who has a physical or mental impairment which has a substantial or long term adverse effect on their ability to carry out normal day today activities. When considering the above any surgery, medication or treatment you have had, or are having should be ignored. Diabetes, cancer, HIV infection and multiple sclerosis are also defined as disabilities.

Having considered the above, do you believe that the definition applies to you?

- Yes
- No known disability

Please tick as many boxes that you feel applies to you:

- Long-standing illness or health condition, such as cancer, HIV, diabetes, chronic heart disease, or epilepsy
- Mental health condition such as depression or schizophrenia
- Physical impairment such as difficulty using your arms or mobility issues which means using a wheelchair or crutches
- Deaf or serious hearing impairment
- Blind or serious visual impairment
- Specific learning disability (eg dyslexia or dyspraxia)
- General learning disability, eg Down's syndrome
- Cognitive impairment, eg ASD or resulting from head injury
- Other
- Prefer not to say

What is your religion or belief?

- Christian (include. Church of England, Catholic, Protestant and all other Christian denominations)
- Buddhist
- Hindu
- Jewish
- Muslim
- Sikh
- No religion
- Other: _____