**Please return this form to:** [**jobs@lewishammusic.org**](mailto:Jobs@lewishammusic.org)

**Lewisham Music, The Green Man, 355 Bromley Rd, SE6 2RP**

**020 3637 8088**

**MUSIC TUTOR APPLICATION FORM**

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| **PERSONAL DETAILS** | | | |
| **TITLE** | |  | |
| **SURNAME** | |  | |
| **OTHER NAMES** |  | **PREVIOUS NAME(S)** |  |
| **DFE TEACHER REFERENCE NO (IF AVAILABLE)** | |  | |
| **NATIONAL INSURANCE NO.** | |  | |
| **ADDRESS IN FULL** | |  | |
| **ADDRESS FOR CORRESPONDENCE (IF DIFFERENT)** | |  | |
| **HOME TELEPHONE NO.** | |  | |
| **WORK TELEPHONE NO.** | |  | |
| **MOBILE NO.** | |  | |
| **EMAIL** | |  | |

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| **INSTRUMENT/VOICE**  ***(Please list the instrument/s that you are able to teach in order of preference)*** | |
| **INSTRUMENT 1** |  |
| **INSTRUMENT 2** |  |
| **OTHER** |  |

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| **POSITION YOU ARE APPLYING FOR** |  |

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| **EDUCATION** | | | | | | |
| **SECONDARY** | | | | | | |
| **NAME & LOCATION OF SCHOOL** | | **DATES ATTENDED: FROM/TO** | | | **QUALIFICATIONS GAINED WITH GRADES** | |
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| **FURTHER & HIGHER EDUCATION (including current studies)** | | | | | | |
| **INSTITUTION** | **DATES ATTENDED: FROM/TO** | | **QUALIFICATION SUBJECT** | **QUALIFICATIONS GAINED (DATE AND LEVEL)** | | **AWARDING BODY** |
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| **TEACHING/TUTORING EXPERIENCE** | | | | |
| Please state your experience of teaching or tutoring privately or in any recognised school or college including any promotions. | | | | |
| **NAME OF EMPLOYER** | **POSITION** | **INSTRUMENT/VOICE TAUGHT** | **LESSON TYPE: INDIVIDUAL, GROUP, WHOLE CLASS** | **DATES (FROM/TO)** |
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| **CURRENT SALARY/SESSIONAL PAY RATE** |  |

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| **RELEVANT PROFESSIONAL DEVELOPMENT and other courses attended during the past three years relevant to this application** | | | |
| **COURSE** | **DATES: FROM/TO** | **FULL-TIME, PART-TIME, DAY OR EVENING** | **COURSE PROVIDER** |
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| **OTHER EMPLOYMENT HISTORY** | | | |
| **EMPLOYER** | **POSITION** | **DUTIES** | **DATES: FROM/TO** |
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| **SUPPORTING STATEMENT** |
| Please complete a statement outlining how your experience, skills and training gained both inside and outside paid work or through study and training meet the selection criteria for this position. Please make full use of this section as the shortlisting is conducted on the basis of the application form and statement only. Please use additional sheets as necessary. A Curriculum Vitae is **NOT** acceptable**.** |
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| **REFEREES** | | | |
| Please state the names, status and addresses of two persons to whom reference may be made one of whom should be your current employer (or Principal of your college or Head of Teaching Practice School if this is your first appointment). References will usually be sent and seen before interview if possible. | | | |
| **NAME** |  | **NAME** |  |
| **JOB TITLE (IF APPLICABLE)** |  | **JOB TITLE (IF APPLICABLE)** |  |
| **EMAIL ADDRESS** |  | **EMAIL ADDRESS** |  |
| **POSTAL ADDRESS (IN FULL)** |  | **POSTAL ADDRESS (IN FULL)** |  |
| **TEL NO. (INCL. CODE)** |  | **TEL NO. (INCL. CODE)** |  |

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| **INTERVIEW AND ASSESSMENT ARRANGEMENTS** | | | |
| **FACILITIES FOR DISABLED APPLICANTS** | | | |
| Please indicate if you would like us to provide you with the following to ensure that you are treated fairly selection procedure. | | | |
| **Information on tape, braille and large print** |  | **Induction loop system** |  |
| **Sign language interpreting** |  | **Wheelchair/scooter user access** |  |
| **Other (please specify)** |  |  | |

**We aim to interview candidates in a wheelchair/scooter user accessible venue. Lewisham Music endeavours to ensure that everyone is treated fairly in its selection process.**

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| **ASYLUM AND IMMIGRATION ACT** | | | | |
| Before you commence working you must provide evidence to demonstrate your right to reside in, or work in the United Kingdom. If you are appointed to a post with Lewisham Music, you will receive further guidance. | | | | |
| **Have you the right to work in the United Kingdom?** | **YES** |  | **NO** |  |
| **Is this subject to a Work Permit/Visa? (If yes please provide evidence)** | **YES** |  | **NO** |  |

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| **REHABILITATION OF OFFENDERS ACT - please read carefully** | | | | |
| Because of the nature of the work for which you are applying, this post is exempt from the provision of the Rehabilitation of Offender (Exception) (Amendments) Order 1986. 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 a dismissal or disciplinary action by Lewisham Music. However, Amendments to the Exceptions Order 1975 (2013) provide that certain spent convictions and cautions are ‘protected ‘and are not subject to disclosure to employers, and cannot be taken into account. Guidance and criteria on the filtering of these cautions and convictions can be found On the Disclosure and Barring Service Website.  Any information given will be completely confidential and will be considered only in relation to any application for positions to which the Order applies. You’re asked to note that a check will be carried out on Police records for details of any criminal offence. | | | | |
| **Do you have any convictions, cautions, reprimands or final warnings that are not ‘protected ‘as defined by The Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended in 2013)?** | **YES** |  | **NO** |  |
| **Are you on the barred list database or ever been disqualified from working with children or been subject to any sanctions imposed by a regulatory body (e.g. DFE)?** | **YES** |  | **NO** |  |
| **Are you living with someone who has been barred from working with children (DBS)?** | **YES** |  | **NO** |  |
| **Are you living in the same household as someone who has been disqualified from working with children under the Childcare Act 2006?** | **YES** |  | **NO** |  |

**If you have answered YES to any of the above questions, please provide the details on a separate sheet marked confidential.**

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| **DECLARATION** | | | |
| **I hereby declare that, to the best of my belief, all the information in this application form is correct.** | | | |
| **Signature** |  | **Date** |  |

**NOTE**

**Should any of the particulars furnished in answer to any questions in this form be found to be false within the knowledge of the candidate or should there be any willful omission or suppression of any material fact, the candidate will, if appointed, be liable to be dismissed. Applicants for employment by Lewisham Music may not in any case or in any circumstance canvas trustees or senior employees. To canvas any such individuals or to obtain from him/her a letter of introduction or recommendation to any employee or trustee of Lewisham Music will disqualify an applicant.**

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| **EQUALITIES AND DIVERSITY MONITORING INFORMATION** | | | | | |
| It is Lewisham Music’s position that everyone should be treated fairly and without discrimination. The information requested on this form will help us to monitor our effectiveness in achieving equality for all.  **The information you give on this form will be treated in the strictest confidence and retained and processed in accordance with the provisions of the Data Protection Act. The information will be used for statistical purposes only and is not part of the selection process. This page will be separated from your application prior to shortlisting.** | | | | | |
| **1. WHERE DID YOU SEE THE POST ADVERTISED / HEAR ABOUT THIS VACANCY?** | |  | | | |
| **2. GENDER** | |  | | | |
| **3. AGE** |  | **DATE OF BIRTH** | |  | |
| **4. DO YOU CONSIDER YOURSELF DISABLED?** | | **YES** |  | **NO** |  |
| (The Equalities Act says that this would be “a substantial or long term physical or mental impairment or health issue which could adversely affect your ability to carry on normal day-to-day activity”) | | | | | |
| If yes, please state the nature of your disability: | |  | | | |
| **5. SEXUAL ORIENTATION** | | | | | |
| Which classification best describes your sexual orientation? | |  | | | |
| **6. ETHNIC ORIGIN** | | | | | |
| Choose one option that best describes your ethnic group or background from the list below which is based on the official 2011 census categories. | | | | | |
| **WHITE** | | | | | |
| 1. English / Welsh / Scottish / Northern Irish / British | |  | | | |
| 2. Irish | |  | | | |
| 3. Gypsy or Irish Traveller | |  | | | |
| 4. Any other White background, *please describe* | |  | | | |
| **MIXED / MULTIPLE ETHNIC GROUPS** | | | | | |
| 5. White and Black Caribbean | |  | | | |
| 6. White and Black African | |  | | | |
| 7. White and Asian | |  | | | |
| 8. Any other Mixed / Multiple ethnic background, *please describe* | |  | | | |
| **ASIAN / ASIAN BRITISH** | | | | | |
| 9. Indian | |  | | | |
| 10. Pakistani | |  | | | |
| 11. Bangladeshi | |  | | | |
| 12. Chinese | |  | | | |
| 13. Any other Asian background, *please describe* | |  | | | |
| **BLACK / AFRICAN / CARIBBEAN / BLACK BRITISH** | | | | | |
| 14. African | |  | | | |
| 15. Caribbean | |  | | | |
| 16. Any other Black / African / Caribbean background, *please describe* | |  | | | |
| **OTHER ETHNIC GROUP** | | | | | |
| 17. Arab | |  | | | |
| 18. Any other ethnic group, *please describe* | |  | | | |

**THANK YOU FOR YOUR COOPERATION.**

**PLEASE RETURN THE COMPLETED FORM TO THE ADDRESS ON THE FRONT PAGE.**