##### Image

##### Job Application Form

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| --- |
| *Please attach separate sheets if necessary.* |
| **1. Post you are applying for** |
| Click or tap here to enter text. |
|  |
| **2. Personal Details** |
| TitleClick or tap here to enter text. |  | Forename(s):Click or tap here to enter text. | Surname:Click or tap here to enter text. |
| Home address:Click or tap here to enter text. | Telephone: Click or tap here to enter text.Mobile: Click or tap here to enter text.Email Address: Click or tap here to enter text.Date of Birth: Click or tap to enter a date.UK National Insurance Number: Click or tap here to enter text. |
| Do you hold a driving licence? ☐ Yes ☐ No  | Do you have a car that can be used for work purposes? ☐ Yes ☐ No |
| **Section for Non UK Residents** | Do you need a work permit to be employed in the UK? ☐ Yes ☐ No |
| **ADDITIONAL NEEDS** Do you consider yourself to have a disability? ☐ Yes ☐ NoPlease tell us if there are any ‘reasonable adjustments’ we can make to assist you in your application or with our recruitment processClick or tap here to enter text. |
|  |
| **3. Academic Qualifications** |
| *Please list all educational Establishments attended from age 11 onward (Secondary School or High School).*  |
| Schools/Colleges | Dates | Examinations passed (give details) |
| From | To |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Higher Education (e.g. University) | Dates | Course title & result (inc. class of degree) |
| From | To |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Professional training / qualifications, with dates and levels attained e.g. First Aid. Life guard training:Click or tap here to enter text. |
| Other training / courses attended relevant to this application, with dates:Click or tap here to enter text. |
|  |
| **4. Employment History** |
| *Please list your previous jobs, starting with the most recent.* |
| Dates  | Employer | Position held / Responsibility |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| **5. Supporting Information** |
| *Why have you applied for this role?* |
| *Please use this space to provide further information about your suitability for this role.* |
| Click or tap here to enter text. |
| *If you were to be successful in filling this position please specify any days/ times you would be unable to work on a weekly basis.* *Our business operates from 10am-8pm Monday-Friday. Please also specify whether you would be able to work weekends.* |
| *Please send a video of you playing a few piano pieces of your choice to the following email address: info@tmusicacademy.com* *A variety of styles would be appreciated.*  |
| **6. References** |
| *Please give three referees; one should be your current Line Manager, one a music teacher/ professional, the third one should ideally be an employer/teacher or somebody who has been in a working situation with you. If you are unable to get some of these please choose suitable alternatives. If you are unsure send us an email.* |
| **1. Current Line Manager/ Previous Line Manager** |
| Name: Click or tap here to enter text. | Position: Click or tap here to enter text. |
| Address:Click or tap here to enter text. | Telephone: Click or tap here to enter text.Email: Click or tap here to enter text. |
| **2. Music Teacher/ Music Professional** |
| Name: Click or tap here to enter text. | Known you since: Click or tap here to enter text.Context: Click or tap here to enter text. |
| Address:Click or tap here to enter text. | Telephone: Click or tap here to enter text.Email: Click or tap here to enter text. |
| **3. Employer/co-worker** |
| Name: Click or tap here to enter text. | Type of work: Click or tap here to enter text. |
| Address:Click or tap here to enter text. | Telephone: Click or tap here to enter text.Email: Click or tap here to enter text. |
| **7. Additional Details** |
| **Convictions** **All applicants are asked to complete this section.****If your answer to the first question is ‘Yes’, please provide in the space below the detail of the conviction(s), the nature of the offence(s) and any penalty/sentence imposed.** | Do you have any unspent convictions ? Yes No |
| Conviction details, including the offence and date:Click or tap here to enter text. |
| **8. Applicants declaration** |
| I confirm that all sections of this application form are to the best of my knowledge, true and correct. I understand that if I am accepted by The Music Academy I will choose to follow the regulations set out by them.**Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:** Click or tap here to enter text. |
| Thank you for taking the time to fill out this application form.Please return this form to info@tmusicacademy.com Or The Music Academy, Job Application, 23 Gold Street, EX16 6QB If you have any questions or would like to receive further information please don’t hesitate to contact us.Email: info@tmusicacademy.com  |