

Application Form Bromley Youth Music Trust Lead Partner in The Bromley Music Education Hub

Supported using public funding by





Department for Education Service Servi

TEACHER OF:

1.	Personal Details (BLOCK CAPITALS)											
Surname:						Title	Title (e.g Mr, Mrs, Miss, Ms):					
Firstr	name/s:											
Previ	ous surname if releva	ant:										
Addre	ess:											
Town	or City:							Po	stcoc	de:		
Telep	phone No. (home):					e-ma	ail (ho	me)				
Telep	phone No. (work):					e-m	ail (wo	ork)				
Telep	phone No. (mobile)											
National Insurance No.												
Do yo	Do you require a work permit to work in the UK? YES NO											
If yes	and applicable, whe	n does your	permit exp	oire? (m	nonth	, year)	:					
Are y	ou recognised by the	DCFS as a	qualified te	eacher	in the	e UK?	`	YES 🗌		N	0 🗆	
If yes	, please give date of	recognition (month, ye	ar):								
Teac	hing experience (yea	rs):										
Wher	n would you be able t	o take up this	s appointm	nent? .								
2.	Teaching experi	ence ent and continue or	verleaf if neces	ssary)								
Name School	of Music Service /	Type of Estab	lishment	From	l	То		Post held			Salary on leaving	

Teaching experience (continued)

Name of Music Service / School	Type of Establishment	From	То	Post held	Salary on leaving

Education, qualifications and training 3.

School, College or University (please state address)	Dates	Titles and subjects	Certificate / Qualification Grade/Class (please specify)

4. Your supporting statement Use this section to set our your reasons for applying for this post and show how your qualifications, experience, skill and qualities support your application.

5. References

Please give the names of two people from whom confidential references may be obtained. They should have knowledge of your professional capacity and one must be your most recent employer. Your referees will be contacted if you are called for interview

Referee	Referee				
Position	Position				
Employer/School name	Employer/School name				
Address	Address				
Post Code	Post Code				
Tel No	Tel No				
E mail	E mail				
Professional relationship	Professional relationship				
Period known (years)	Period known (years)				
6. Additional information					
Superannuation					
Do you contribute to the Teachers' Pension Scheme:	YES NO				
Or other Superannuation (give name)					
Vehicle Access					
Do you hold a Full UK Driving Licence?: YES	NO 🗆				
Do you have access to a vehicle for business purposes	s? YES \ NO \				
Disability					
Do you consider yourself to have a disability? YES [□ NO □				
If yes: (i) If you are aware of any equipment or adaptati	ions that will assist you, please give details:				
	ene mar um deciet yea, predec give detaile.				
(ii) Will you require any assistance if called for in	terview? If ves please give details:				
(ii) This you require any accistance it cance for in	no				

Disclosure of relationship							
Are you related to or have a close personal relationship with any Trustee or employee of Bromley Youth Music Trust?							
YES NO							
7. Protection of Children							
Disclosure of any criminal background is required. Because of the nature of the work, teaching in the UK is exempt from the provisions of Section 4(2) of the Rehabilitation of Offenders Act 1974 (Exceptions) (Amendment) Order 1986, and therefore applicants are not entitled to withhold information about convictions which for other purposes are spent under the provisions of the Act. Offers of employment will also be dependent on completion of a satisfactory police check. Disclosure of a criminal background will not necessarily bar you from any appointment.							
Have you ever been convicted of a criminal offence?							
If yes, please give details:							
Date:Offence:							
Sentence:							
Please give details of your police check with the DBS.							
Police check date:							
8. Data Protection							
Under the terms of the Data Protection Act 1998, the information you provide on this form will only be used by Bromley Youth Music Trust for the purpose of assessing your suitability for employment, for monitoring policies and procedures, and for personal management purposes.							
For any position that you apply for, if unsuccessful, this information may be retained on file for 6 months. The information may be used in internal proceedings to consider a complaint about the selection process and/or to defend against a legal challenge to the fairness of the selection process from any interested party. The information you provide to us on this form may also be used in the prevention and detection of crime and fraud, or shared with other bodies administering public funds solely for this purpose.							
9. To be signed by all applicants							
I confirm that, to the best of my knowledge, the information on this form is true and correct.							
Lam in possession of the certificates I claim to hold, and understand that wilful falsification may result in							





dismissal if I am appointed.





I understand that any offer of employment will be subject to satisfactory medical and police checks.

Date:

Bromley Youth Music Centre Southborough Lane Bromley BR2 8AA