**INNER CITY MUSIC LTD APPLICATION FOR EMPLOYMENT**

**Before completing this form, please read the GUIDANCE NOTES in the accompanying job pack.**

Post applied for:

**PERSONAL DETAILS**

|  |
| --- |
| Title: |
| Surname: | Other names: |
| Address:  Postcode: | |
| Home telephone number: | Work telephone number: |
| Mobile telephone number: | E-mail address: |

**CURRENT OR MOST RECENT EMPLOYMENT (PAID OR UNPAID)**

|  |  |
| --- | --- |
| Name and address of Employer: | |
| Job title: | Date of appointment: |
| Period of notice required/Leaving date if not now working: | |
| Reason for leaving: | |
| Please provide a brief outline of your main responsibilities: | |

**PREVIOUS EMPLOYMENT (PAID AND/OR UNPAID)**

Please start with your most recent position. Continue on a separate page if necessary.

|  |  |  |  |
| --- | --- | --- | --- |
| Date of Employment  From: To: | Name and Address of Employer: | Job title and brief details of main responsibilities: | Reason for leaving: |
|  |  |  |  |

**EDUCATION, TRAINING AND PROFESSIONAL QUALIFICATIONS**

Please start with the most recent qualification and include any currently being pursued.

|  |  |  |
| --- | --- | --- |
| Date obtained: | Name of school, university, college etc: | Qualifications obtained: |
|  |  |  |

**SUPPORTING STATEMENT**

Please write a statement explaining:

* Why are you applying for this position, and;
* drawing on your personal and work experience, education and training, how you meet the requirements set out in the person specification and job description.

Please continue on a separate page if necessary.

**REFEREES**

Please provide details of two people, not related to you, who will provide an employment reference for you. One of these must be your current or most recent employer if you are not currently employed. The other should be a referee who can express a professional opinion on your work and your ability to perform the job for which you are applying.

|  |  |
| --- | --- |
| Name of referee: | Name of referee: |
| Name of organisation: | Name of organisation: |
| Occupation: | Occupation: |
| Address:  Postcode: | Address:  Postcode: |
| Email: | Email: |
| Contact number: | Contact number: |
| Relationship to you: | Relationship to you: |

May we request a reference May we request a reference

|  |  |  |  |
| --- | --- | --- | --- |
|  | at any time |  | at any time |

|  |  |  |  |
| --- | --- | --- | --- |
|  | only after an offer of employment |  | only after an offer of employment |

Please provide details of any special arrangements or adjustments you would require to enable you to participate in our selection process effectively.

In order to comply with the Immigration Act 1996 we are required to see proof of your right to work in the UK. This will be requested once an offer of employment has been made. However, if you require a work permit in order to work in the UK please indicate by ticking this box:

Please provide details of any unspent convictions or cautions you have under the terms of the Rehabilitation of Offender Act, 1974. Offences resulting in licence endorsements should be disregarded. Failure to disclose such information may result in dismissal or disciplinary action. This information will be treated as confidential and will not necessarily preclude you from employment.

**DECLARATION**

To the best of my knowledge the information on the application form and equal opportunities monitoring form is correct.

Signed: Date:

**EQUAL OPPORTUNITIES MONITORING FORM**

Inner City Music Ltd wants to meet the aims and commitments set out in its Equality Action Plan and Equality, Inclusion and Diversity policy. This includes not discriminating under the Equality Act 2010, and building an accurate picture of the make-up of the workforce in encouraging equality and diversity.

The organisation needs your help and co-operation to enable it to do this, but filling in this form is voluntary. The information provided will be kept confidential and will be used for monitoring purposes.

Post applied for:

Please state how you found out about the job:

If you have any questions about the form contact hr@bandonthewall.org

**PERSONAL DETAILS**

Name:

Date of Birth:

**Gender** Male  Female  Intersex  Non-binary  Prefer not to say 

If you prefer to use your own gender identity, please write in:

**Age** 16-24  25-29  30-34  35-39  40-44  45-49  50-54  55-59  60-64  65+  Prefer not to say 

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**What is your ethnicity?**

Ethnic origin is not about nationality, place of birth or citizenship. It is about the group to which you perceive you belong. Please tick the appropriate box

***Asian or Asian British***

Indian  Pakistani  Bangladeshi  Chinese  Prefer not to say 

Any other Asian background, please write in:

***Black, African, Caribbean or Black British***

African  Caribbean  Prefer not to say 

Any other Black, African or Caribbean background, please write in:

***Mixed or Multiple ethnic groups***

White and Black Caribbean  White and Black African  White and Asian  Prefer not to say  Any other Mixed or Multiple ethnic background, please write in:

***White***

English  Welsh  Scottish  Northern Irish  Irish 

British  Gypsy or Irish Traveller  Prefer not to say 

Any other White background, please write in:

***Other ethnic group***

Arab  Prefer not to say  Any other ethnic group, please write in:

**Do you consider yourself to have a disability or health condition?**

Yes  No  Prefer not to say 

What is the effect or impact of your disability or health condition on your work? Please write in here:

The information in this form is for monitoring purposes only. If you believe you need a ‘reasonable adjustment’, then please discuss this with your manager, or the manager running the recruitment process if you are a job applicant.

What is your sexual orientation?

Heterosexual  Gay  Lesbian  Bisexual  Asexual  Pansexual  Undecided  Prefer not to say 

If you prefer to use your own identity, please write in:

What is your religion or belief?

No religion or belief  Buddhist  Christian  Hindu  Jewish 

Muslim  Sikh  Prefer not to say  If other religion or belief, please write in:

Do you have caring responsibilities? If yes, please tick all that apply

None 

Primary carer of a child/children (under 18) 

Primary carer of disabled child/children 

Primary carer of disabled adult (18 and over) 

Primary carer of older person 

Secondary carer (another person carries out the main caring role) 

Prefer not to say 