



Application Form  
**BROMLEY YOUTH MUSIC TRUST**  
 Lead Partner in The Bromley Music Education Hub

**TEACHER OF:**

**Personal Details** (BLOCK CAPITALS)

Surname: \_\_\_\_\_ Title (eg. Mr, Mrs, Miss, Ms): \_\_\_\_\_

Firstname/s: \_\_\_\_\_

Previous surname if relevant: \_\_\_\_\_

Address: \_\_\_\_\_

Town or City: \_\_\_\_\_ Post Code: \_\_\_\_\_

Telephone No. (home): \_\_\_\_\_ Email (home): \_\_\_\_\_

Telephone No. (work): \_\_\_\_\_ Email (work): \_\_\_\_\_

Telephone No. (mobile): \_\_\_\_\_

National Insurance No.									
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Do you require a work permit to work in the UK? YES  NO

If yes and applicable, when does your permit expire? (month, year): \_\_\_\_\_

Are you recognised by the DfES as a qualified teacher in the UK? YES  NO

If yes, please give date of recognition (month, year): \_\_\_\_\_

Teaching experience (years): \_\_\_\_\_

When would you be able to take up this appointment? \_\_\_\_\_

**Teaching experience** (please start with most recent and continue overleaf if necessary)

Name of Music Service / School	Type of Establishment	Post Held	Salary on Leaving

**Current or Most Recent Post** (including initial teacher training placement)

(a) Full name and address of school/college, or employer:

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(b) Type of School: \_\_\_\_\_ (c) Number of Pupils: \_\_\_\_\_

(d) Local Education Authority: \_\_\_\_\_

(e) Position held: \_\_\_\_\_ (f) Scale/grade/MPS: \_\_\_\_\_

(g) Appointment held – Full-time/Part-time: \_\_\_\_\_

(h) Dates from/to: \_\_\_\_\_

(i) Present salary (give details of special allowances): \_\_\_\_\_

## Education, Qualifications and Training

School, College or University <small>(please state address)</small>	Dates	Titles and Subjects	Certificate/Qualification/ Grade/Class <small>(please specify)</small>

## Your Supporting Statement

As part of your application you are requested to set out on a separate sheet(s) relevant information in support of your application. Please clearly mark your separate sheet(s) to avoid confusion. Use this section to set out your reasons for applying for this post and show how your qualifications, experience, skills and qualities support your application.

## References

References will be obtained from employers during the last 3 years. If you have not been in employment during this time please give the names of two personal referees (not family members) from whom confidential references may be obtained. We may also contact previous employers where you have worked with children. Your referees will be contacted if you are called for interview – please let us know if this is not suitable.

Referee \_\_\_\_\_

Referee \_\_\_\_\_

Relationship to You \_\_\_\_\_

Relationship to You \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Post Code \_\_\_\_\_

Post Code \_\_\_\_\_

Tel No \_\_\_\_\_

Tel No \_\_\_\_\_

Email \_\_\_\_\_

Email \_\_\_\_\_

Period known (years) \_\_\_\_\_

Period known (years) \_\_\_\_\_

## Gaps in Employment

Please list any gaps in employment together with the reasons for the gaps:

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## Additional Information

### Superannuation

Do you contribute to the Teachers' Pension Scheme: YES  NO

Other Superannuation Scheme (give name): \_\_\_\_\_

If part-time, have you made a positive election to join the Teachers' Pension Scheme: YES  NO

### Driving

Do you hold a Full UK Driving Licence? YES  NO

Do you have access to a vehicle for business purposes? YES  NO

### Disability

Do you consider yourself to have a disability? YES  NO

If yes: (i) If you are aware of any equipment or adaptations that will assist you, please give details:

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(ii) Will you require any assistance if called for interview? If yes, please give details:

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### 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

### 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 or received a Police Caution?

(You do not need to include youth cautions, reprimands or warnings)

YES  NO

If yes, please give details:

Date: \_\_\_\_\_ Offence: \_\_\_\_\_

Sentence: \_\_\_\_\_

Please give details of your police check with the Disclosure and Barring Service:

DBS Number: \_\_\_\_\_ Issue Date: \_\_\_\_\_

### Data Protection

Under the terms of the Data Protection Act 1998, the information you provide on this form will only be used by the Academy 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.

#### To be signed, by hand, by all applicants

I confirm that, to the best of my knowledge, the information on this form is true and correct.

I am in possession of the certificates which I claim to hold and understand that willful 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.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Recruitment Monitoring

The Academy is committed to Equal Opportunities. The aim of its policy is to ensure that no job applicant or employee is treated unfairly on the grounds of age, colour, national origins, nationality, race, disability, family commitments, gender, marital status, membership or otherwise of a trade union, religion, or sexual orientation.

Without accurate data on the composition of our workforce and on job applicants we are unable to monitor the effectiveness of our policies and procedures. Therefore we ask for your cooperation in completing the monitoring section of this form. This information will be used for statistical purposes only and will not be reproduced in a way that enables individuals to be identified. All information supplied by job applicants is treated in the strictest confidence.

### Job Title

### Personal Details

SURNAME: \_\_\_\_\_

FIRST NAME: \_\_\_\_\_

GENDER: \_\_\_\_\_

AGE: \_\_\_\_\_

### Ethnic Group

#### Asian or Asian British

Bangladeshi  Indian  Pakistani

#### Black or Black British

African  Caribbean

#### Mixed

White/Asian  White/Black Asian  White/Black Caribbean

#### White

British  European  Irish

Chinese or other ethnic Group

Other (please write)

I decline to self-classify

### Media Monitoring

Please indicate how you became aware of the post:

BYMT Website  BYMT Social Media  Local Newspaper

Professional journal  Bromley Council Website  Friend/Relative

Other (please specify) \_\_\_\_\_

## DISABILITY

To help you decide whether you have a disability as defined under the Disability Discrimination Act 1995 please read the following information:

A disability is defined as 'a physical or mental impairment, which has a substantial and long-term adverse effect on a person's ability to carry out normal day-to-day activities.'

The effect an impairment may have on day-to-day activities is defined in the Act as falling within the following categories:

1. Mobility
2. Manual Dexterity
3. Physical co-ordination
4. Continence
5. Ability to lift, carry or otherwise move everyday objects
6. Speech, hearing or eyesight
7. Memory of ability to concentrate, learn or understand
8. Perception of the risk of physical danger

The impairment has to be substantial, that is something more than trivial and it needs to be long-term, i.e. has lasted or is likely to last in total for at least twelve months or is likely to last for the rest of the life of the person affected. Having considered the above information please tick one of the following:

I DO consider myself to have a disability

I DO NOT consider myself to have a disability

I DECLINE to self-classify as to whether I consider myself to have a disability