

TRINITY LABAN CONSERVATOIRE OF MUSIC & DANCE

APPLICATION FORM (TEACHING OR RESEARCH POST)

NOTES TO APPLICANTS

If insufficient space is allowed on this application form, please continue on a separate sheet.

When completed the form should be sent by the closing date stated in the advertisement to:

E-mail: staffrecruitment@trinitylaban.ac.uk

Alternatively it can be posted to:
Human Resources Department
Trinity Laban Conservatoire of Music and Dance
Creekside
London SE8 3DZ

We should be grateful if you would also complete and return the Equal Opportunities Monitoring form. The form will *not* be forwarded to the Selection Panel, and will *not* be taken into account in the selection decisions for this post.

Please include supporting evidence (e.g. Published papers, CD/Tape recordings, Videos etc) that may assist in your application. Should you wish these to be returned, please enclose a stamped-addressed envelope. You can also supply links to websites if preferred.

Alternative Formats


If you or someone you know requires application documents in an alternative format such as Braille, large print or e-mailed to you as a Word document, please contact us and we will make suitable arrangements.

Data Protection

In order to satisfy the provisions set out within the Data Protection Act 1998, the Conservatoire confirms that the details contained in this application will at all times remain confidential and will be held in a secure place. Details entered onto the Conservatoire's computer system will be used to assess your suitability for the post applied for and will only be released to relevant personnel for that purpose. If your application results in successful recruitment to the post applied for then the details contained herein will form the basis for your employee personnel file. Unsuccessful applications will remain on the Conservatoire's files for a period of 12 months and will be destroyed thereafter.

Notification

Whilst it is always the Conservatoire's intention to notify applicants as to the outcome of their application as soon as possible after the deadline date, it is not always possible to do so. If you do not receive an invitation to interview within 4 weeks after the closing date for applications you may assume that your application has not been successful.

	Human Resources Department Trinity Laban Conservatoire of Music and Dance, Creekside, London SE8 3DZ	For office use only R'cvd on.....
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Application for the post of: (enter below)

Please complete this form using black ink. If there is insufficient space for your information, continue on a separate sheet of paper. **Please note that during the recruitment and selection process your application will be assessed against the selection criteria for the role. You are therefore advised to address these in your application.**

YOUR DETAILS		
Forenames	Surname	Title
Address:		
		Postcode:
E-mail Address:		
Telephone (Mobile):	(Home):	
Present post and duties:		
Name and address of employer:		
Date of appointment to this post:		
Period of notice/date able to start:	Present salary £	per annum

HIGHER EDUCATION AND QUALIFICATIONS*(including proficiency in foreign languages, even if not the subject of formal qualification)*

Date		Institution Attended	Qualifications	Subject and Class
From	To			

REFEREES *(names, addresses, telephone and email address of three persons)*

Please also state the capacity in which each referee is known to you.

(1)

(2)

(3)

May we take up these references immediately? YES / NO**EXPERIENCE** *(previous posts held, with dates and other relevant information)*

Name and address of Employer	Title of Post	Dates		Duties etc.
		From	To	

TEACHING EXPERIENCE <i>(within the last five years)</i>		
(a) Courses taught	Institution	Level of qualification (e.g. Degree)
(b) Number of postgraduate research students supervised and fields of research (if applicable)		Degrees obtained/in progress

RESEARCH FUNDING OBTAINED <i>(if applicable and within the last five years)</i>			
Funding Body	Dates		Title of Project
	From	To	

CONSULTANCIES		
Organisation	Dates	Duties

PUBLICATIONS, RECORDINGS and/or RESEARCH work and research interests

HEALTH

1) Please give details of any illness/disabilities that might affect your work or safety at work, so that we may consider means of overcoming them.

2) Approximately how many days sickness absence have you had during the last 12 months?

IMMIGRATION, ASYLUM AND NATIONALITY ACT 2006

Under the Immigration, Asylum and Nationality Act 2006 proof of entitlement to work in the United Kingdom is required before commencing employment.

Applicants for this role must be eligible to work legally in the United Kingdom. If you do not have the necessary permissions to do so, unfortunately we are unable to consider your application.

Please click on the relevant box to confirm that you have the necessary permissions to work legally in the United Kingdom in the capacity of the advertised post (select as appropriate)

YES

NO

Before commencing employment you will be required to produce original documentary evidence indicating that you have the right to work in the UK, and we will keep copies of the documents

REHABILITATION OF OFFENDERS ACT

1) Have you ever been convicted of a criminal offence, reprimanded or given a final warning by the police?

YES NO (tick as applicable)

If yes, please provide details on a separate sheet. Please note that you do not have to disclose convictions that would have been deemed to be spent under the Rehabilitation of Offenders Act.

Have you ever left a job for any reason other than resignation or end of fixed term contract?
If so, please give details):

Where did you see this post advertised?

Is there any other post in the Conservatoire for which you have applied recently?

ADDITIONAL INFORMATION

(e.g. reasons for applying for this post, details of experience, including training, etc) **You are advised to address the selection criteria for the role as detailed in the Person Specification. Please continue on a separate sheet if necessary**

INTERESTS AND ACTIVITIES *(both within and outside the context of your employment)*

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DECLARATION

I declare that the information given on this application is, to the best of my knowledge, accurate and correct.

Signed Date

CONTINUATION SHEET

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Equal opportunities monitoring information

Trinity Laban is committed to creating a culture in which diversity and equality of opportunity are promoted actively and in which discrimination is not tolerated. We recognise the educational and business benefits of having a diverse community of staff and students and to this end we are working towards building and maintaining an environment which values diversity. Trinity Laban is committed to challenging all forms of inequality.

As part of the Public Sector Equality Duty, the Conservatoire gathers equality data on its job applicants and staff. We encourage and welcome job applications from all parts of society. We ask applicants to complete and return an equal opportunities monitoring form with their application, to help us check the effectiveness of our equality and diversity policies.

The information you provide will assist us in monitoring our recruitment function with reference to our commitment to equality of opportunity. The information will be treated confidentially and will be separated from your application. The information neither form part of your application nor be available to the selection panel. The information will be used to analyse job applications anonymously.

If you would prefer not to complete certain fields then please select the "Prefer not to say" response.

Name

Please choose one option from each of the sections listed below and then tick the appropriate box.

Your age years

Date of birth

Your sex

Male

Female

Is your gender identity the same as the gender you were originally assigned at birth?

Yes

No

Prefer not to say

Your ethnic group (options are listed alphabetically)

Please indicate your cultural background. Ethnic origin is not about nationality, place of birth, or citizenship. UK citizens can belong to any of the groups indicated.

Asian or Asian British

Indian

Pakistani

- Bangladeshi
- Any other Asian background, please state

Black or Black British

- Caribbean
- African
- Any other Black background, please state

Chinese or other Asian ethnic group

- Chinese
- Any other Ethnic background, please state

Mixed

- White and Asian
- White and Black African
- White and Black Caribbean
- Any other mixed background, please state

White

- British
- Gypsy or traveller
- Any other white background, please state

Religion or belief

Which group below do you most identify with?

- No religion
- Buddhist
- Christian
- Jewish
- Hindu
- Muslim
- Sikh
- Spiritual
- Other, please state
- Prefer not to say

<p>Pregnancy and maternity</p> <p>Are you currently pregnant?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Prefer not to say</p>	<p>Are you currently on maternity leave?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Prefer not to say</p>
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her any of the following apply to you.

- Bisexual
- Gay man
- Gay woman/lesbian
- Heterosexual
- Other
- Prefer not to say

Disability

Do you consider yourself to have a disability, impairment health condition or learning difference?

- Yes
- No
- Prefer not to say

Please tick one/all boxes that apply to describe your disability, impairment or health condition.

- Two or more impairments and/or disabling medical condition
- Specific learning disability (such as dyslexia, dyspraxia or AD(H)D)
- General Learning disability (such as Down’s syndrome)
- A social/communication impairment (such as Asperger’s syndrome/other autistic spectrum disorder)
- Long-standing illness or health condition (such as cancer, HIV, diabetes, chronic heart disease or epilepsy)
- Mental health condition (such as depression, schizophrenia or anxiety disorder)
- Physical impairment or mobility issues (such as difficulty using arms or using a wheelchair or crutches)
- Deaf or serious hearing impairment
- Blind or serious visual impairment uncorrected by glasses
- Other type of disability, impairment or medical condition not listed above

<p>Paternity leave</p> <p>Are you currently on paternity leave?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Prefer not to say</p>	
<p>Adoption leave</p> <p>Are you currently on adoption leave?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Prefer not to say</p>	

Thank you for completing this form.