Education and Learning Manager

## Application Summary Sheet

**(Application No……….…..)**

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| Please Note: |
| * This form should be completed in black ink/black type. * Additional sheets may be attached where necessary. * Applications received after the closing date will not normally be considered. * The closing date is **Monday 27th May 2024** * **Shortlisted candidates will be informed by Thursday 30th May** * Interviews will be on **Monday 3rd June. *(****Please indicate if you are available in the application).* A second interview may be required. * Anticipated start date – **July 2024.** |

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| **Personal Details** | |
| Miss/Mrs/Ms/Mr | Address: |
| First Name (s): |
| Surname: | Post Code: |
| E-mail address: | |
| Daytime phone: | Evenings/Weekends phone: |

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| **Current or Last Employer name:** | | | |
| Job Title: | | | |
| Responsible to: | | Date Appointed: | |
| Employer’s Name: | | Present Salary: | |
| Employers Address: | | Present Grade: | |
| Post Code: | | Date Left: | |
| **General Information:**  Are you related to a Board member of Asian Arts Agency or any of their employees? | | | |
| Yes ◻ | No ◻ | | If ‘Yes’ please give details |
| Have you been convicted of a criminal offence (other than motoring offences and spent convictions) | | | |
| Yes ◻ | No ◻ | | \*If ‘Yes’, please give details in a sealed envelope marked with your name. |
| Do you need work permit to be employed in the UK? Yes ◻ No ◻ | | | |
| If you already have a work permit, when does it expire?  *(please note that your current work permit may not be valid for this post)* | | | |

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| **Referees**: Please give details of two people who are prepared to act as referees for you. One of these should be your present (or most recent) employer. References will only be taken up for applicants selected for interview, and you should ensure your referees are in a position to respond promptly. | |
| Name: | Name: |
| Referee Position Held: | Referee Position Held: |
| Organisation: | Organisation: |
| Address: | Address: |
| Post Code: | Post code |
| Email: | Email: |
| May we contact prior to interview? | May we contact prior to interview? |

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| I confirm the details in this form are correct.  Signature: Date: |

**Send by email to:** [**Jobs@asianartsagency.co.uk**](mailto:Jobs@asianartsagency.co.uk) **with all other relevant information as mentioned in the job description** - please add ‘**Education and Learning Manager’** in the subject heading

To ensure prompt consideration, returned applications should reach us by no later than the closing date and time shown on the front of this form. Late applications will not normally be considered.

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| **Diversity and Equality – Our Commitment**  Asian Arts Agency is highly committed to promoting diversity and values all people. We welcome and encourage applications from those currently underrepresented in our workforce and in the arts community; including disabled people.  We are committed to managing a fair and equitable recruitment process.  We aim to interview any disabled candidate who fulfils the minimum criteria for the role as described in the Person Specification. |
| **Data Protection Statement**  The information that you provide on this form and that obtained from other relevant sources will be used to process your application. The personal information that you give us will also be used in a confidential manner to help us monitor our recruitment process (ref Data Protection Act 2018).  If you succeed in your application, the information will be used in the administration of your employment with us. We may also use the information if there is a complaint or legal challenge relevant to this recruitment process. We may check the information collected, with third parties or with other information held by us. We may also use or pass to certain third parties information to prevent or detect crime, to protect public funds or in other ways as permitted by law.  By signing the application form it will be assumed by Asian Arts Agency that you agree to the processing of sensitive personal data, (as described above), in accordance with Data Protection law. |

#### Asian Arts Agency

###### Equal Opportunities Monitoring

**Instructions:**

This section is removed from the other Application details and will not be seen by the short listing panel.

**(For office use only: Application No )**

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| **Equality Monitoring**: We ask for this information to monitor achievement of our Employment Equality policies. Appointments are not based on information given here. Each item below, please tick the appropriate box ( ◻ ) or respond as indicated. | | | | | | |
| **Gender:**  Female □  Male □  Prefer not to say □  I prefer to self-describe: | | | **Date of birth:**  My date of birth is: | | **Media source:** Where did you see/hear about this post? | |
| **Ethnic Origin:** Please tick the one box that describes your ethnic origin most closely. I am: | | | | | | |
| White ◻ British  ◻ Irish  ◻ Gypsy or Irish Traveller  ◻ Any other  White  Background?  Indicate below: | Dual Heritage ◻ White and Black  Caribbean  ◻ White and Black  African  ◻ White and Asian  Any other Dual  Heritage  Background?  Indicate below: | **Asian or Asian** **British**  ◻ Indian  ◻ Pakistani  ◻ Bangladeshi  ◻ Any other Asian  background?  Indicate below: | | **Black or Black British**  ◻ Caribbean  ◻ African  ◻ Any other Black  background?  Indicate below: | | **Chinese or other ethnic group**  ◻ Chinese  ◻ Other Indicate below: |
| **Sexual Orientation – How do you identify yourself?**  Heterosexual/straight □ Bi-sexual □  Gay man/homosexual □ Gay woman / lesbian □  Other □ Prefer not to say □ | | | | | | |
| \*The Disability Discrimination Act defines disability as:  ‘*A physical or mental impairment which has a substantial and long-term effect on the person’s ability to carry our normal day-to-day activities.’* | | | | | | |
| Under this definition, would you say you have a disability? Yes □ No □  If you have answered Yes please tick (✔) the categories that apply:  Visual Impairment □ Mental health condition □  Physical disabilities □ Cognitive or learning disabilities □  Hard of Hearing/deaf □ Other long term/chronic condition □  Not known/prefer not to say □ | | | | | | |