**P****roject Coordinator: Live Music Events and Touring**

**Application Summary**

**(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 **Thursday, 7 August at 9.30 am** * Please submit your application as soon as possible as candidates shortlisted early maybe interviewed prior to the closing date. * We aim for a successful candidate to start as soon as reasonably possible. |

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| **Personal Details** |  |
| First Name(s): | Address: |
| Surname: | Post Code: |
| E-mail address: |  |
| Daytime phone: | |

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| **Current or Most Recent Employer name:** | |
| Job Title: | |
| Responsible to: | Date Appointed: |
| Employer’s Name: | Salary: |
| Employer’s Address: |  |
| Post Code: | Notice Period: |
| **General Information:**    Are you related to a Board member of Asian Arts Agency or any of their employees?  No  Yes 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? N/A  *(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? |

I confirm the details in this form are correct.

Signature: Date:

**Send by email to: Jobs@asianartsagency.co.uk with all other relevant information as mentioned in the job description** - please add **Project Coordinator: Live Music Events and Touring** in the subject heading

To ensure prompt consideration, returned applications should reach us by no later than the closing date. Late applications will not normally be considered.



**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:** | **Media source:** Where did you see/hear about this post? |

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| Please tick the one box that describes your ethnic origin most closely. I am: | | | | |
| **Ethnic Origin:**  **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: |

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| 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 □ |