



FOR OFFICIAL USE ONLY

## AUDITION APPLICATION FORM

Applications should be emailed to: [efisher@bsorchestra.co.uk](mailto:efisher@bsorchestra.co.uk)  
or post to: Emma Fisher, BSO, 2 Seldown Lane, Poole, BH15 1UF

*Data Protection: The information that you have given in this form will be held for recruitment purposes only and will not be disclosed outside the BSO without your permission.*

***Under United Kingdom Immigration Law BSO can only accept applications from candidates who are eligible to work in the UK at the time of application. It is your responsibility to ensure that you have the correct documentation, including a work permit if applicable.***

APPLICANTS ARE REQUIRED TO SEND A SCANNED COPY OF THEIR WORK PERMIT (IF APPLICABLE) WITH THIS APPLICATION FORM. ***Without this information we cannot take your application further.***

<b>POSITION APPLIED FOR</b>	Co-Principal (No.2) / Principal (No.3) 2 <sup>nd</sup> Violins. <b>Please delete, as appropriate, or apply for both</b>
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### CLOSING DATE FOR APPLICATIONS: Thursday 5 March 2020

(applications received after the closing date will be considered at the Company's discretion)

Surname		Title	
Other names			

<b>PERSONAL DETAILS</b>			
Full home address			
Postcode		Country	
Phone / mobile		Diary Service	
Email		National Insurance No.	
Nationality		Are you eligible to work in the UK?	Yes / No (provide visa if necessary)
Have you ever been convicted of a criminal offence, other than motoring offences & spent convictions? (declaration subject to the Rehabilitation of Offenders Act 1974)	Yes / No		

BSO is committed to equality & diversity in employment. If you have any accessibility requirements please tell us about the adjustments we need to make to assist you at audition.

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This section of the form will be detached and given to our musicians, hence the request for your name once again.

<b>FULL NAME</b>
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<b>ORCHESTRAL EXPERIENCE</b>
Please list details of your orchestral experience, stating position where applicable. Please start with the most recent, and include dates.

<b>MUSICAL EDUCATION &amp; TRAINING</b>			
Institution	Study/degree course	Dates	Qualification obtained

<b>TEACHERS</b>	
Name	Dates

**ADDITIONAL INFORMATION**

Please use this space to provide any additional information that is relevant to your application e.g. details of solo/chamber music performances, master classes, competitions etc.

How did you hear about this vacancy?

**Notes:**

1. If you are offered the position you will be required to complete a medical questionnaire.
2. On taking up your post you will be required to undergo a hearing check as part of the induction process.
3. If you are offered the position you will be required to undergo a DBS (Disclosure & Barring Service) check.
3. It is not necessary to provide a CV, with your application form, but you may include one if you wish.

**I can confirm that to the best of my knowledge the above information is correct. I accept that deliberately providing false information could result in my dismissal.**

Signature:

Date:

**Note: Please include a copy your visa (if applicable) when you submit your application. Without this information we are unable take your application further.**

**CONFIDENTIAL**

**EQUAL OPPORTUNITIES MONITORING FORM**

We are committed to developing positive policies to promote equal opportunities in employment and prohibiting unlawful discrimination on the grounds of age, sex, marital status, race, colour, national or ethnic origin, disability, sexual orientation and religion.

In order to ensure that these policies are being followed, and for no other purpose, all applicants are asked to provide the following information, which will be treated in the strictest confidence and will only be used for statistical monitoring purposes. The information will not form part of the selection process

If you have any questions concerning this please contact Natalie Wright on 01202 644704

**Position applied for: No.2 / No.3 2<sup>nd</sup> Violin 2020**

**Age:** Please indicate to which age group you belong:

Under 25	.....	25-34	.....	35-44	.....
45-54	.....	55-64	.....	Over 65	.....

<b>Sex:</b> Please indicate: Male	.....	<b>Sexual Orientation:</b> Please specify
.....		(Discretionary)
Female	.....	

**Please tick which ethnic group you belong to. (These categories are recommended by the Commission for Racial Equality:**

- White** (British, Irish or other white background)
- Mixed** (White and Black Caribbean, White and Black African, White and Asian or any other mixed background please specify)
- Asian or Asian British** (Indian, Pakistani, Bangladeshi or any other Asian background)
- Black or Black British** (Caribbean, African or any other Black background)
- Chinese**
- Any other ethnic group, please specify:**

**Would you describe yourself as having a disability?**

Please indicate: Yes ..... No .....  
.....

**Are you registered disabled?**

Please indicate: Yes ..... No

**Please indicate to which religious group you belong (if any):** .....