

Pettman DARE Fellowship: Music Education Project Management

Aotearoa New Zealand Citizen/Permanent Resident Application Form 2024/25

Private & Confidential

Applicants may request support in completing the form by contacting darcy,thorpe@operanorth.co.uk

The completed application is to be emailed to darcy.thorpe@operanorth.co.uk by midnight BST (UK) on Sunday 16 June 2024

You are also invited to complete the Opera North Equality, Diversity and Inclusion survey.

If the appointed Fellow does not hold a UK passport, a <u>Student visa</u> for the UK is required before registering at the University of Leeds. The cost of the visa will be paid by Opera North.

1. PERSO	ONAL DETAILS					
First name		Surname				
Address		Telephone numbers				
E-mail						
Please confirm that you are an Aotearoa New Zealand national or permanent resident?						
Do you require a visa to study in the UK? YES / NO						
Are you related to an existing employee of Opera North, New Zealand Opera or the University of Leeds? YES / NO						
Do you have any unspent convictions under the UK Rehabilitation of Offenders Act? YES / NO If yes, please give details If unsure whether a conviction is spent or unspent, please consult with the Disclosure & Barring Service before completing.						
	applicant will be subject to a UK Reh ill be applied for and funded by Oper		fenders Act Disclosure & Barring Service (DBS)			
2. REFEI	RENCES					
The Fellowship will be offered subject to the receipt of two satisfactory references, one of which should be from your current or most recent employer. Personal referees can only be provided when there is no previous employer or educational establishment to which references can be made. Although nobody will be approached without your agreement, you should be ready to provide the full details of two referees at any point during the recruitment process.						
3. DECLA	ARATION					
I confirm that the information provided in this form and in any attachments is correct and understand that any misrepresentation or omission may result in the rejection of my application or termination of the Fellowship. I agree that my application may be processed in line with the Data Protection Act 1998. On electronic applications, typing the name will be equivalent of signature. Proof of qualifications will be required.						
Signature		Date				

4. EDUCATION & 7	TRAINING	
School, College or University	Qualification (including subject and grade, or expected result)	
Other relevant study, training and qualifications Date		
Membership of Profes	sional Bodies	
Trembership of Froncis	None Doules	

5. WORK EXP	PERIENCE			
Employer's name and location (most recent first)	Position held & salary (if part-time, please state hours)	Dates employed	Brief description of main responsibilities	Reason for leaving

6. SUPPORTING STATEMENT
Please explain why you have applied for the Pettman DARE Fellowship 2024/25? (Max 500 words)
What makes you suitable to be the Pettman DARE Fellow 2024/25? (Max 500 words)
What do you hope to achieve through the Fellowship? (max 500 words)