# APPLICATION FORM

Please return your completed form by email to [work.experience@danceeast.co.uk](mailto:work.experience@danceeast.co.uk)

or by post to Work Experience, DanceEast, Jerwood DanceHouse, Ipswich, IP4 1DW

|  |  |  |  |
| --- | --- | --- | --- |
| **FULL NAME** |  | | |
| **ADDRESS** |  | | |
| **CONTACT (Applicant)** | **Telephone (landline/mobile)** | **Email address** | |
| **CONTACT (FOR THOSE UNDER THE AGE OF 17)** | **Telephone (landline/mobile)** | **Email address** | |
| **NAME OF SCHOOL**    **CONTACT DETAILS (Work experience coordinator, if applicable)** |  | | **SCHOOL YEAR**  **(open to Year 10 school students only)** |
|  |
| **Please state the dates that you are able to complete a placement:** | **Placements are available in the Summer Term for one week only, usually Monday – Friday.** | | |
| **Tell us about your interest in dance**  *(200 words max)* |  | | |
| **What are you hoping to get out of your Work Experience at DanceEast**?  **Please also let us know if you require any adjustments to support you in a placement at DanceEast:**  *(250 words max)* |  | | |
| **Please indicate how your skills will benefit DanceEast:**  *(200 words max)* |  | | |

PLEASE ENSURE ALL SECTIONS ARE COMPLETED ABOVE. PLEASE ALSO COMPLETE THE EQUAL OPPOURTUNITIES FORM BELOW AND RETURN WITH YOUR APPLICATION.

**Please note deadline for application is 14 February 2020**

**Applicants will be notified in March 2020 if DanceEast is able to offer a placement.**

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| **EQUAL OPPORTUNITIES**  DanceEast is an Equal Opportunities Employer. This means DanceEast will ensure all applicants receive equal treatment, irrespective of their sex; sexual orientation, marital status, race, age or disability. Once received it will be separated from your application and remain anonymous, before the application is reviewed by the selection panel. To ensure the effectiveness of the policy and to assist in its development, DanceEast monitors all applications. You are requested to complete the section below, which will be treated as confidential and used for statistical purposes only.  **Please tick the appropriate boxes:**  **Gender: Male**  **Female  Non-binary  Prefer not to disclose**  **Date of Birth:** | | | | | | |
| **Ethnic Origin:** I would describe my ethnic origin as: | | | | | | |
| **White** | British |  | Irish |  | European |  |
| **Mixed** | White & Black Caribbean |  | White & Black African |  | White & Asian |  |
|  | Any Other Mixed Background | | |  |
| **Asian or Asian British** | Indian |  | Pakistani |  | Bangladeshi |  |
|  | Any Other Asian Background | | |  |
| **Black or Black British** | Caribbean |  | African |  |
|  | Any Other Black Background | | |  |
| **Chinese or**  **Other Ethnic Group** | Chinese |  | Any Other Ethnic Group  Please specify ……………………………………………. | | |  |
| **Prefer not to disclose** |  |

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| **Disability:** Do you consider yourself to have a disability? | | | | | | | |
|  | No known disability |  | Blind/serious visual impairment |  | Deaf/serious hearing impairment |  | Physical impairment or mobility issues |
|  |  |  |  |  |  |  |  |
|  | Mental health condition |  | Long-standing illness or health condition, e.g. epilepsy |  | Two or more impairments and/or medical conditions |  | A specific learning difficulty, e.g. dyslexia |
|  |  |  |  |  |  |  |  |
|  | Social and/or  communication impairment, e.g. Autistic Spectrum Disorder |  | A disability, impairment or medical not listed |  | I do not wish to give this information |  |  |