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| **Music Scholarship**  **APPLICATION FORM**  Submit your application to: Jane Gray  [hr@sjp.org.uk](mailto:hr@sjp.org.uk) by 2pm on Friday 27 June. | | | **St James’s Church**  **197 Piccadilly, London W1J 9LL**  **www.sjp.org.uk** | |
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| **1 APPLICANT** |  | | |  |
| **Full name** |  | | | |
|  |  | | |  |
| **Address (including postal code)** |  | | | |
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| **Telephone and email** | Telephone (day)\* |  | | |
|  | Telephone (evening) |  | | |
|  | Mobile |  | | |
|  | Email |  | | |
|  | *\* provide a week-day daytime contact number only if we may use it.* | | | |
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| **Current availability** | If successful in your application, when would you be free to start (no later than beginning of October) | | | |
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| **Scholarship you are applying for (Singing (please state voice part) or Organ)** |  | | | |
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| **2 EXPERIENCE** | Please give details of your experience making music in worship. | | | | | | |
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| **3 PREVIOUS EMPLOYMENT** | Give dates, starting with the most recent employment where applicable to your scholarship application. | | | | | | |
|  | Dates | Employer | | Position | | Reasons for leaving | |
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| **4 EDUCATION & QUALIFICATIONS** | Please provide details of your education and qualifications. | | | | | | |
|  | Educational  Establishment | | Qualifications gained and grade | | From | | To |
| *Include secondary and any higher education* |  | |  | |  | |  |
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| **Other training or qualifications** |  | | | | | | |
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| **Membership of any professional or other bodies** |  | | | | | | |
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| **5 SUPPORTING INFORMATION**  **Please demonstrate how your skills and experience make you suitable for consideration for the Scholarship programme.** *We will use what you say here to decide who is to be short-listed. Please, therefore, pay careful attention to the requirements and be sure to address them here.* | | | | |
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| **5a Any other information, comments or ideas relevant to your application for the scholarship** | | | | |
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| **5b Please tell us about your other interests and/or achievements** | | | | |
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| **6 PERSONAL STATEMENT**  **Please state briefly why you wish to apply for this scholarship. What aspects of the scholarship or of this Church attract you particularly?** | | | | |
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| **7 REFERENCES** Please give names, occupation and contact details of two people who can provide references if you are short-listed for an audition. One should be your present or most recent person who has knowledge of your music skills and then one other who also has recent knowledge of your skills. | | | | |
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| **Referee A** | Name & Address | Occupation:  Email address & telephone number: | | |
|  |  |  |  |  |
| **Referee B** | Name & Address | Occupation:  Email address & telephone number: | | |
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| **Tick here if you** **do not want** any of your referees contacted unless we are considering offering you a scholarship. | | | |  |
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| **8 RIGHT OF ABODE & RIGHT TO WORK** | In accordance with the Asylum and Immigration Act 1996, you will be required to show proof of your Right to Abode. Are you a British Citizen, or Commonwealth Citizen with the Right of Abode in the UK. Until 30th June 2021 for EU citizens currently living in the UK there is no change in residence rights and status. As an EU citizen if you were living in the UK by 31st December 2020 you need to have applied for EU Settlement Scheme to continue living in UK after 30th June 2021. (Note: For students currently studying where there is an applicable visa in place verification will be required concerning the visa held.) | | | | | | | | |
|  | Yes |  | No |  | If no, you will need to have applied for EU Settlement Scheme and have proof of this application | | | | |
|  | If you currently a hold a Visa e.g. as a student studying – do you hold applicable Visa? (If N/A please state according.) | | | | | | | | |
|  | Yes |  | No |  | If yes, please state date  of expiry. | | |  | |
| **9 DECLARATION** | I hereby confirm that the information given is to the best of my knowledge true and complete. I understand that if any of the information I have given is found to be false or misleading, the PCC can withdraw their offer of the scholarship to me, or cancel their agreement with me. I understand that if this is discovered at a later date, the agreement may be ended. | | | | | | | | |
|  |  | | | | | | Date | |  |
|  |  | | | | | |  | |  |
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| Please tell us where you saw the scholarship advertisement. | | | | | |  | | | |

**Please indicate which of the following audition dates you could be available.**

**Please marks as many dates as possible. We will try to match up with your availability but can’t guarantee to do this.**

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|  | **May be Available** | **Not Available** |
| Thursday 3 July 2025 (afternoon) |  |  |
| Friday 4 July 2025 (morning) |  |  |
| Friday 4 July 2025 (afternoon) |  |  |
| Saturday 5 July 2025 (morning) |  |  |
| Saturday 5 July 2025 (afternoon) |  |  |

19th June 2025