**EQUAL OPPORTUNITIES RECRUITMENT MONITORING FORM**

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| **To make sure the Authority’s recruitment and selection process is being carried out fairly and to help check that our Equal Opportunities Recruitment policy is working, the Authority records the race, gender and disability of people who apply for its jobs.****Because of this and for no other reason you are asked to answer the following questions. Thank you for your assistance.****This form will not be considered during the shortlisting process.**  |
| Position applied for: **EDUCATION TEAM LEADER** |

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| Surname/Family name:  | First Name:  |
| SexMale [ ]  Female [ ]  Date of birth:  |
| Please state how you found out about this post: 1. Indeed [ ] 2. Linkedin [ ]  | 5. WRWA website [ ] 6. Other [ ]  |

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| I would describe myself as being the following: |
| **1. White** |
| [ ]  British | [ ]  Irish | [ ]  Any other White background |
|  |  | Please specify:  |
|  |
| **2. Black or Black British** |
| [ ]  Caribbean | [ ]  African | [ ]  Any other Black background: |
|  |  | Please specify: |
|  |
| **3. Mixed** |
| [ ]  White and Black Caribbean |  | [ ]  White and Black African |
| [ ]  White and Asian |  | [ ]  Any other Mixed background: |
|  |  | Please specify:  |
|  |
| **4. Asian or Asian British** |
| [ ]  Indian | [ ]  Pakistani | [ ]  Any other Asian background: |
| [ ]  Bangladeshi |  | Please specify:  |
|  |
|  |
| **5. Other ethnic group**Please specify:  |
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|  |  |
| 1. **Prefer Not to state**
 |[ ]

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| **DISABILITY**The Authority is a Disability Confident employer and is keen to encourage disabled people to apply for jobs at the Authority. The following information is sought for the following three reasons:1. to make sure that disabled applicants are shortlisted if they meet the minimum criteria - those listed as ‘essential’ on the person specification;
2. for monitoring purposes; and
3. to determine any help you may require at the selection stage.

(a) Do you consider yourself to have a disability which is defined in the Equality Act 2010 as ‘a physical or mental impairment which has a substantial and long-term adverse effect on ability to carry out normal day-to-day activities.’? YES [ ]  NO [ ]  |

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| If YES please indicate the nature of your disability: |

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| (b) Are there any reasonable adjustments you would like to make to enable you to participate fully in the recruitment process? YES [ ]  NO [ ]  |

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| If YES please give details: |

**Please return the completed form together with your application form.**