

EQUAL OPPORTUNITIES MONITORING FORM

The following information is required in order that the Council's Equal Opportunities Policy can be monitored effectively. (Please refer to guidance notes)

Please tick the box from the list below which best describes the ethnic group to which you belong:

Age _____ Date of Birth _____ Sex: Male Female

White

- British
- Irish
- Other White background

Please specify

Black / Black British

- Black Caribbean
- Black African
- Other Black background

Please specify

Chinese / other ethnic group

- Chinese
- Any other background

Please specify

Asian / Asian British

- Indian
- Pakistani
- Bangladeshi
- Other Asian background

Please specify

Mixed

- White & Black Caribbean
- White & Black African
- White & Asian
- Other mixed background

Please specify

Do you consider yourself to have a disability? Yes No

Is there anything we need to know about your disability in order to offer you a fair selection interview? (For example a signer or an accessible interview room)

How did you hear about this vacancy?

Please specify: Job Centre Word of Mouth Website

Advertisement (please specify)

Other (please specify)
