**Equal Opportunities Monitoring Form**

### Office use only

Application received: DD/MM/YY

Checked by:

Application no: G

To ensure applications are judged on merit and to ensure UEL Students’ Union employs Equal Opportunities best practice, this sheet will be separated from your application.

**Details**

|  |  |  |
| --- | --- | --- |
| **Title**  | **First Names** | **Surname** |
| **Address**  **Postcode**  |
| Email address  |
| **Mobile Phone Number**  |
| **Where did you see this post advertised?**  |

**Ethnic Origin:**

How would you classify your ethnic origin?

Black British Black African Black Caribbean Asian British

Asian Other White Other (please state)………………………

**Disability:**

*The Disability Discrimination Act 1995 defines disability as “A physical or mental impairment which has a substantial and long term adverse effect on a person’s ability to carry out normal day to day activities. The disability could be physical, sensory or mental and must be expected to last at least 12 months”*

Do you have a disability as defined by the Disability Discrimination Act?

Do you require any assistance to enable you to attend interview e.g. signing?

If yes, what type of assistance?

………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

*Disabled applicants are invited to contact us in confidence at any point during the recruitment process to discuss steps that could be taken to overcome operational difficulties presented by the job, or if any adjustments or support are required.*

**Declaration**

|  |
| --- |
| **Have you ever been convicted of a criminal offence?** If yes, please give details (except for convictions regarded as spent under the Rehabilitation of Offenders Act 1974) |
| I declare that the details contained in this application are correct to the best of my knowledge and in particular that I have not omitted any material facts that have a bearing on my application.**Signed Dated:**  |