

## Equal Opportunities Recruitment Monitoring Form – Strictly Confidential

IT IS THE POLICY OF Stowe School that no job applicant or employee receives less favourable treatment on the grounds of race, gender, disability, class, nationality, age, marital status, sexual orientation, trade union, political or religious beliefs.

This information is used for monitoring purposes only and will be kept confidential and separate from your application. It does not form part of the selection process.

Application for the post of:		
Where did you learn of this post:	√	Comments:
Newspaper (please name)		
Internet/Website (please name website):		
Other Source:		
Word of Mouth (friends/relatives):		
Recruitment Agency:		

Section 1. Personal Details	
Title: <i>(Dr/Mr/Mrs/Miss/Ms)</i>	Date of Birth:
Surname:	Nationality:
First Names:	Marital Status:

Section 2. Recruitment Monitoring	
Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female
How would you describe your ethnic origin?	
<input type="checkbox"/> Asian/Asian British – Bangladeshi	<input type="checkbox"/> Asian/Asian British – Indian
<input type="checkbox"/> Asian/Asian British – Pakistani	<input type="checkbox"/> Asian/Asian British – any other Asian background
<input type="checkbox"/> Black/Black British – African	<input type="checkbox"/> Black or Black British – Caribbean
<input type="checkbox"/> Black/Black British – any other Black background	<input type="checkbox"/> Chinese
<input type="checkbox"/> Mixed – White and Asian	<input type="checkbox"/> Mixed – White and Black African
<input type="checkbox"/> Mixed – White and Black Caribbean	<input type="checkbox"/> Mixed – any other mixed background
<input type="checkbox"/> White – British	<input type="checkbox"/> White – Irish
<input type="checkbox"/> White – any other white background	<input type="checkbox"/> Any other
How would you describe your religion or belief?	
<input type="checkbox"/> Christian	<input type="checkbox"/> Buddhist
<input type="checkbox"/> Muslim	<input type="checkbox"/> Sikh
<input type="checkbox"/> Hindu	<input type="checkbox"/> None
<input type="checkbox"/> Jewish	<input type="checkbox"/> Other (please specify)
<input type="checkbox"/> Prefer not to disclose	
What of the following describes your sexual orientation?	
<input type="checkbox"/> Bi-sexual	<input type="checkbox"/> Gay
<input type="checkbox"/> Lesbian	<input type="checkbox"/> Heterosexual
<input type="checkbox"/> Other	<input type="checkbox"/> Prefer not to disclose

Disability is defined by the Disability Discrimination Act 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.*

Are you a disabled person as defined by the Disability Discrimination Act?

Yes

No

If Yes, please detail below any reasonable adjustments to the environment you think you may require.

Signature

Date

Thank you for completing this form. Please return it with your application.

