

EQUAL OPPORTUNITIES MONITORING FORM

This form is separate from the main application form. Your answers will be treated in the strictest confidence and the information you provide will only be used for monitoring purposes. How you complete this form has no connection evaluation of your application in any way.

Please complete and return this form to: Recruitment@Reach2.org

Post Applied For:		Do you consider yourself as having a disability? Yes $\;\square$ No \square
Surname:		If you have a disability what equipment, adaptations or
Forename(s):		adjustments to working conditions would assist you in carrying out your duties?
Gender: Male □ Female □		
Which age group do	you apply to:	
Under 20 =		
Under 20 □		
21 - 29		
30 - 39		
40 - 49		
50 - 59		
60 and over $\hfill\Box$		
Which of the following best describes your Ethnic origin?		
White:		Mixed:
British		White & Black Caribbean □
Irish		White & Black African
Other		White & Asian
		Other Mixed Group
Black or Black British:		
Caribbean		Asian or Asian British:
African		Indian
		Pakistani 🗆
Other Black back		Bangladesh \square
Other Black back	ground 🗆	Other Asian
Chinese or other ethnic group:		
Chinese		If "other" please specify:
Any other ethnic	group 🗆	
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