

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 to the 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 ☐ No ☐

Surname:

If you have a disability what equipment, adaptations or adjustments to working conditions would assist you in carrying out your duties?

Forename(s):

Gender: Male ☐ Female ☐

Which age group do you apply to:

Under 20 ☐

21 - 29 ☐

30 - 39 ☐

40 - 49 ☐

50 - 59 ☐

60 and over ☐

Which of the following best describes your Ethnic origin?

White:

British ☐

Irish ☐

Other ☐

Black or Black British:

Caribbean ☐

African ☐

Other Black background ☐

Chinese or other ethnic group:

Chinese ☐

Any other ethnic group ☐

Mixed:

White & Black Caribbean ☐

White & Black African ☐

White & Asian ☐

Other Mixed Group ☐

Asian or Asian British:

Indian ☐

Pakistani ☐

Bangladesh ☐

Other Asian ☐

If "other" please specify:

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