



Equal Opportunities Monitoring Form

Compton Hospice is committed to the equality of opportunities. In order to monitor applicants, we would be grateful if you would complete this form and return it, unsigned, with your application form. The form will be detached from your application before the short listing process

POSITION APPLIED FOR _____

How would you describe your ethnic origin?		
WHITE	ASIAN OR ASIAN BRITISH	OTHER ETHNIC GROUPS
British []	Indian []	Chinese []
Irish []	Pakistani []	Any other Ethnic Group []
Any other white background []	Bangladeshi []	
	Any other Asian Background []	
MIXED	BLACK OR BLACK BRITISH	ARAB OR MIDDLE EASTERN DESCENT
White and Black Caribbean []	Caribbean []	Arab []
White and Black African []	African []	North African []
White and Asian []	Any other Black Background []	Iraqi []
Any other Mixed Background []		Kurdish []
Please specify your ethnic origin if not listed here _____		

Gender		
Male []	Female []	

Age	
What age are you? _____	

<p>Disability Do you have a disability within the meaning of the Disability Discrimination Act 1995 (this means any physical or mental impairment which has lasted or is expected to last at least twelve months and which substantially affects your ability to carry out normal day to day activities)? YES / NO</p> <p>If yes, please list any actions you would recommend we take to overcome any disadvantage that you feel you might have compared to other candidates as a result of your disability. Please list any measures we could take that would put you on an equal basis with any other candidates in the recruitment process, including the interview and any selection tests.</p>

<p>Additional information Where did you see the advertisement for this vacancy?</p>
