|  |
| --- |
| This section will be separated from your application form upon receipt and does not form part of the selection process. It will be retained by Human Resources purely for monitoring purposes. |

|  |  |
| --- | --- |
| Application for the post of: |       |

|  |
| --- |
| To help us ensure that our Equal Opportunities Policy is fully and fairly implemented (and for no other reason) please COMPLETE THIS SECTION OF THE APPLICATION FORM. |
| What is your Ethnic Group? |
| Choose ONE section from A to E, and then tick the appropriate box to indicate your cultural background. |
| A. White |  | D. Black or Black British |  |
| White UK |  | Black Caribbean |  |
| Irish |  | Black African |  |
| White non-UK |  | Any other Black background |  |
| Any other White background |  |  |  |
| B. Mixed |  | **E. Other ethnic group** |  |
| White & Black Caribbean |  | Arab |  |
| White & Black African |  | Any other ethnic background |  |
| White & Asian |  | **F. I do not wish to provide this information** |  |
| Any other Mixed background(please give details): |  |
| C. Asian or Asian British |  |
| Indian |  |
| Pakistani |  |
| Bangladeshi |  |
| Chinese  |  |
| Any other Asian background |  |

|  |
| --- |
| This section will be separated from your application form upon receipt and does not form part of the selection process. It will be retained by Human Resources purely for monitoring purposes. |

|  |
| --- |
| Sexuality  |
| Heterosexual |  | Bisexual |  |
| Lesbian / Gay woman |  | Gay man |  |
| Prefer not to say |  |  |  |

|  |
| --- |
| **Disability** |
| The information in the form is for monitoring purposes only. If you believe you need a ‘reasonable adjustment’, then please discuss this with your manager, or the manager running the recruitment process if you are a job applicant |
|

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Do you consider yourself disabled?** |

|  |  |  |  |
| --- | --- | --- | --- |
| **Yes:** |  |  **No:** |  |

 |

 |
| ***What is the effect or impact of your disability or health condition on your ability to give your best at work? Please write in here:*** |

Please continue on a separate sheet if necessary

|  |
| --- |
| Religion or Belief  |
| Buddhist |  | Sikh |  |
| Christian |  | Muslim |  |
| Hindu |  | Other ( Please specify) |  |
| Jewish |  |  Prefer not to say |  |

|  |
| --- |
| Are there any considerations in relation to any of the information that you have provided in this form that we should take into account for making interview  |
|  |

|  |
| --- |
| **How to return this form** |
| ***Please ensure you have answered all questions***  |

### **By E-Mail:**

hr@mulberryschoolsforgirls.org

### **By Hand or Post:**

Mulberry School for Girls

Richard Street

Commercial Road

London

E1 2JP

### **Enquiries:**

Telephone: 020 7790 6327

|  |
| --- |
| **All information supplied in this form will be treated in confidence**  |