

ANNEX A

EQUAL OPPORTUNITIES MONITORING FORM

Please select the relevant option or add your own statement as appropriate and return this form with your application. **This information is not part of your application and will not be used in any part of the selection process.**

Ethnic Origin

Please select:

If other please provide details:

Age

Please select:

Religion

Please select:

If other please provide details:

Sex (according to birth certificate or GRC)

Please select:

Gender identity if different to sex

Please select:

Sexual orientation

Please select:

Disability

St Philips Chambers welcomes applications from people with disabilities and aims to be supportive in their employment. We will be pleased to consider any request for reasonable adjustments when applying to or working for us.

Do you consider yourself to have a disability? Yes No

(Under the Equality Act 2010 a disability is defined as a physical, sensory or mental impairment, which has, or had, as substantial and long-term adverse effect on a person's ability to carry out normal day to day activities)

Please indicate on your application form details of any request for reasonable adjustments you may have in undergoing selection for the post for which you are applying.