

RECRUITMENT MONITORING FORM

Please complete all sections on the form. If any section does not apply to you, enter not applicable (n/a). Once completed save this file as a PDF document and then email it, along with any other required/supporting documents to hr@lindale-homes.co.uk or upload to the job advert on the breathehr.com website.

OFFICE USE ONLY	
REFERENCE NO:	
DATE SENT OUT:	
DATE RETURNED:	
APPLICATION NO:	
CLOSING DATE:	

9.GENDER					
I AM:					
MALE	FEMALE	OTHER	TRANSGENDER		
To help us monitor our Equal Opportunities policy please ticket or complete the following boxes as appropriate. The information will be detached from your application form before being passed to the Shortlisting Panel.					
9. ETHNIC ORIGIN					
Choose one section from (A) to (E) then tick the appropriate box to indicate your cultural background. These are based on the 2011 Census with additional categories included.					
		ndicate your cultural background. ⁻	These are based on the 2011		
		ndicate your cultural background. ⁻	These are based on the 2011		
Census with additional categori		ndicate your cultural background. ⁻	These are based on the 2011 BOSNIAN		
Census with additional categoria	ies included.				
Census with additional categoria	ies included.				
Census with additional categoria A - WHITE EUROPEAN BRITISH	ies included. IRISH				
Census with additional categoria A - WHITE EUROPEAN BRITISH	ies included. IRISH ROMA				









9. ETHNIC ORIGIN **B-MIXED** WHITE/BLACK CARIBBEAN WHITE/ASIAN **BLACK/ASIAN** WHITE/BLACK AFRICAN IF OTHER, PLEASE INDICATE **C-ASIAN OR ASIAN BRITISH** INDIAN KASHMIRI **PAKISTANI BANGLADESHI** IF OTHER, PLEASE INDICATE **D-BLACK OR BLACK BRITISH** CARIBBEAN **AFRICAN** IF OTHER, PLEASE INDICATE **E - CHINESE OR OTHER ETHNIC GROUP** CHINESE ARAB KURDISH **AFGHAN VIETNAMESE**



IF OTHER, PLEASE INDICATE









DISABILITY

The Equality Act 2010 defines a person as having a disability if he/she has a physical or mental impairment which has a substantial and long term adverse effect on his/her ability to carry out normal day to day activities.

DO YOU HAVE A DISABILITY AS DEFINED ABOVE?

YES NO

If all of the above does not apply to you, however, you consider yourself to have a disability, please tick here.

EMPLOYMENT STATUS

ARE YOU CURRENTLY UNEMPLOYED?

YES NO

SEXUAL ORIENTATION

BISEXUAL GAY/LESBIAN HETEROSEXUAL/STRAIGHT

NOT DISCLOSED OTHER PREFER NOT TO SAY

RELIGION

CHRISTIAN BUDDHIST HINDU JEWISH

MUSLIM SIKH NO RELIGION NOT STATED

IF OTHER, PLEASE INDICATE

JOB ADVERTISEMENT

HOW DID YOU FIND OUT ABOUT THIS JOB? (Please specify source or publication)











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