**VOLUNTEER APPLICATION FORM**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Equal Opportunities Monitoring Form**  This form will be used to monitor how Age UK Redbridge compares nationally (and locally) with regard to equal opportunities. It will not be held for any purpose other than monitoring.  **This form is optional and anonymous.** It does not constitute any part of the recruitment and selection process and is separated from the application form upon receipt by a member of staff who is not involved in the recruitment and selection of staff.  Please complete this form in **BLACK**. | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Gender:** | | Male | | | | | | | Female | | | | | **Date of birth:** | | | | |  | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Age:** | 16-25 | | | 26-35 | | | | | | | | 36-45 | | | 46-55 | | | | | | 56-65 | | | | Over 65 | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Do you suffer from a recognised disability as outlined in the Disability Discrimination Act or DDA?** | | | | | | | | | | | | | | | | | **Yes** | | | | |  | | **No** | |  |
| **DISABILITY DEFINITION:** Individuals who were registered under the Disabled Persons (Employment) Act 1994 on both 12 January 1995 and 2 December 1996 are treated as being disabled under the DDA.  The DDA states: ‘a person has a disability…if he has a **physical or mental impairment** which has a **substantial** and **long-term adverse effect** on his ability to carry out **normal day-to-day activities**’.  The person must satisfy the four criteria in bold in the above statement to fall under and, therefore, be protected under the DDA. | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **If yes, please state what the disability is:** | | | | | | |  | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Ethnicity** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| White UK | | | | |  | | |  | | | Indian | | | | |  | |  | | | | | | | | |
| Irish | | | | |  | | |  | | | Pakistani | | | | |  | |  | | | | | | | | |
| White other | | | | |  | | |  | | | Bangladeshi | | | | |  | |  | | | | | | | | |
| White/Black Caribbean | | | | |  | | |  | | | Asian other | | | | |  | |  | | | | | | | | |
| White/Black African | | | | |  | | |  | | | Black Caribbean | | | | |  | |  | | | | | | | | |
| White/Asian | | | | |  | | |  | | | Black African | | | | |  | |  | | | | | | | | |
| Mixed other | | | | |  | | |  | | | Black other | | | | |  | |  | | | | | | | | |
| Chinese | | | | |  | | |  | | |  | | | | | Click here to enter text. | | | | | | | | | | |
| Other, please state | | | | | |  | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Sexual Identity** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Heterosexual | | | Gay | | | | | | | Lesbian | | | Transgender | | | | | | | Bi | | | Prefernot to say | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Religion** | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | Prefer not to say | | | |