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| **Age UK South Gloucestershire**Personal details form | Application Ref:***(For Age UK use)*** |
| **Please complete the details below and on the next page and return with your application form. The two pages will be separated when they are received. This will allow shortlisting to be completed without these details and therefore be based only on information enclosed in the application form.** |
| **Your Full Name & Address** | **Telephone Numbers:** | **Email address** |
|       | Home:      Work:      Mobile:       |       |
| **Date of Birth:** | **How did you hear about this vacancy?** |

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| **REFERENCES****Please provide the details of two referees. (These will only be taken up if you are the successful candidate.) One of these must be your line manager at your last or current place of work, if applicable.** |
| **Referee 1: Name / Company & Title (if applicable) / Address / Email / Phone** | **Referee 2: Name / Company & Title (if applicable) / Address / Email / Phone** |
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| **Any offer of employment will be subject to satisfactory references, a satisfactory Enhanced Disclosure from the Disclosure and Barring Service (DBS) being received, and confirmation of your right to work in the UK.** |
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| **DECLARATION****I confirm that all the information included in this application is to the best of my knowledge correct.****Signed\* (or ‘by email’):** **Date:**  |

If applications are submitted by email, they will have been deemed as ‘signed’ by the applicant.

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| **Age UK South Gloucestershire**Equalities monitoring form | Application Ref:***(For Age UK use)*** |

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| A record is kept of all applications for employment to monitor the personal details of all applicants and measure the effectiveness of our Equal Opportunities Policy. This information is confidential, kept separate from your application during the recruitment process and does not affect the selection process. |

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| Age |
| Date of BirthOR Age |  | ☐ Prefer not to say |
| Click here to enter text. |

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| **Do you consider yourself to be a carer?** |
| ☐ Yes On average how many hours are spent caring? ☐ under 50 ☐ over 50 | ☐No☐Prefer not to say |

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| Do you describe yourself as Disabled? |
| ☐ Yes |
| ☐ No |
| ☐ Prefer not to say |

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| **Ethnicity**Please state what you consider your ethnic origin to be. (Ethnicity is distinct from nationality and the categories below are based on the 2011 Census in alphabetical order.) |
| **Asian** | **Black** | **Chinese or other ethnic group** |
| ☐ Indian | ☐ Caribbean | ☐ Chinese |
| ☐ Pakistani | ☐ African | ☐ Any other ethnic group (please detail)Click here to enter text. |
| ☐ Bangladeshi | ☐ Any other Black background (please detail) Click here to enter text. |
| ☐ Any other Asian background (please detail)Click here to enter text. |
| **Mixed** | **White** |
| ☐ White and Black Caribbean | ☐ English |  ☐ Any other White background (please detail) Click here to enter text. |
| ☐ White and Black African | ☐ Irish |
| ☐ White and Asian | ☐ Scottish | ☐ Prefer not to say |
| ☐ Any other mixed background (please detail) Click here to enter text. | ☐ Welsh  |

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| Gender |
| ☐ Female | Does your gender identity match your sex as registered at birth? |
| ☐ Male |
| ☐ Prefer not to say | ☐ Yes | ☐ No |

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| Religion/ belief |
| ☐ Buddhist | ☐ Sikh |
| ☐ Christian | ☐ Other (please state)Click here to enter text. |
| ☐ Hindu |
| ☐ Jewish |  ☐ No religion |
| ☐ Muslim |  ☐ Prefer not to say |

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| Sexual Orientation |
| ☐ Bisexual | ☐ Heterosexual |
| ☐ Lesbian/Gay woman | ☐ Prefer not to say |
| ☐ Gay man |
| ☐ Other (please state) Click here to enter text. |

**PLEASE REMEMBER TO RETURN THIS MONITORING FORM WITH YOUR COMPLETED APPLICATION FORM – WITHOUT THIS FORM, YOUR APPLICATION WILL NOT BE ACCEPTED**