

## Policy

It is the Council's policy to recruit the most suitable candidate for the job. Selection for recruitment and training will only be made on merit. The Council will not discriminate against any person because of age, disability, health, language, marriage or citizenship, family or personal circumstance, nationality or citizenship, political opinion, religion or belief, race or ethnic origin, sex or gender, gender reassignment, sexual orientation, social class, unrelated criminal convictions, or any other condition or requirement which cannot be shown to be justifiable.

## Monitoring Forms

We are required to monitor and report on the implementation and performance of our Diversity and Equality Policy. Monitoring data is also used for the purpose of equality impact assessments, but not to identify individuals. Under the Public Sector Equality Duty we are required to publish workforce profile data and recruitment statistics. This information given in this form will be used for that purpose. **You do not have to answer all the questions** on the form if you do not wish, however, all information is confidential and we would encourage you to answer as many of the questions as possible.

All the information contained in this form will be used for employment purposes only. It will be treated as strictly confidential and will not be disclosed to any manager responsible for recruitment.

Please complete the information below and return it with your application.

Full Name	Post Number	
<input type="text"/>	<input type="text"/>	
Date of Birth	Sex	
<input type="text"/>	Male	Female

Ethnic Origin	Black African Black
White British	Caribbean
White Irish	Black Other
White Other	(Please State) <input type="text"/>
(Please State) <input type="text"/>	Mixed - White & Black Caribbean
Asian/Asian British - Indian	Mixed - White & Black African
Asian/Asian British - Pakistani	Mixed - White & Black Asian
Asian/Asian British - Bangladeshi	Mixed - Other
Asian/Asian British - other	(Please State) <input type="text"/>
(Please State) <input type="text"/>	Prefer not to say
Chinese	Other (Please State) <input type="text"/>

### Disability

Do you consider yourself to be disabled\*?      Yes      No      Prefer not to say

If yes, please indicate the type of disability:

If you require reasonable adjustments relating to your disability to be made through the selection process, please detail below:

\*The Equality Act 2010 defines disability as 'a physical or mental impairment which has a substantial and long-term adverse effect on a persons' ability to carry out normal day to day activities'.

### Religion/Belief

Baha'i	Jainist	Sikh	Agnostic
Buddhist	Jewish	Zoroastrian	None
Christian	Muslim	Humanist	Prefer not to say
Hindu	Rastafarian	Atheist	Other (Please State)

### Sexual Orientation

Bisexual	Heterosexual/Straight
Gay Man	Other
Gay Woman/Lesbian	Prefer not to say

### Do you have any caring responsibilities\*\*?

Yes, childcare (children under 16)	Yes, other
No caring responsibilities	Prefer not to say

\*\*i.e. providing support to a child, spouse, partner, civil partner, 'near relative' or someone living at the same address as you, who cannot manage without your help because of illness, disability or age. The definition of 'near relative' includes parents, parents-in-law, adult child, adopted adult child, siblings (including in-laws), uncles, aunts, grandparents and step-relatives.  
We report on this data as part of our PSED obligations and by doing so we can ensure that we are developing policies to help carers balance work and care commitments.

### Declaration:

I understand that the information I have supplied in this form is correct to the best of my knowledge. This data will be processed by North Norfolk District Council and held electronically. For successful applicants this copy will be stored securely with your personnel file. The data may be used for employment, reporting and monitoring purposes and I consent to the data being held and used for these purposes.

I certify that to the best of my knowledge the information given in this form is true.

*If you are submitting this form electronically, please enter your name or your electronic signature below.*

*In doing so, you confirm that the above statement is correct, as if the document had been signed and dated by hand.*

Signed

Date

Return to: [hr@north-norfolk.gov.uk](mailto:hr@north-norfolk.gov.uk) or  
Human Resources Service, Council Offices, Holt Road, Cromer, NR27 9EN.

**STRICTLY CONFIDENTIAL**