## DIVERSITY AND EQUALITY DECLARATION



Equal opportunities	
The following information you give will be used only to ma effectiveness. All received information will be confidential and and subsequent interview.	
Job applying for	Ethinicity
	Asian
Gender – tick the appropriate box	Indian Bangladeshi
Male Female Other	Pakistani Other
	Black
Date of birth – DD MM YYYY	British Caribbean
	African Other
Marital status	White
Single Married	British
Widowed Partner	Other
Disability — Do you have a disability as defined by the Disability Disabled Act?	Mixed  White/Plack Caribbase
Yes No	White/Asian White/Black Caribbean  White/Black Other
	Willte/Black Other
Mental Health – Do you have any history of mental	Other ethnic groups
health issues?	Chinese Philippine
Yes No	White/Black Other
The Disability Discrimination Act is defined by a illness or injury that lasts in excess of one year. It will have an adverse effect on your ability to carry out normal day to day activities.  Declaration: I have given this information so you as my employer can assist in protecting my health and Safety at work.	
Signature	Full name
	Date