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FOR OFFICE USE ONLY.  
PLEASE DO NOT MARK.

REF NO:

# Equal Opportunities Monitoring Form

Post applied for	
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## Personal details

First name			
Surname/family name			
Preferred name			
Middle/other names			
Title			
Home tel.		Date of birth (dd/mm/yyyy)	/ /
Mobile tel.		Gender	
Work tel.		May we contact you at work?	
<b>Home address</b>			
Address line 1			
Address line 2			
Address line 3			
Town/city			
County			
Postcode			
Country			
UK National Insurance Number			
Are you a United Kingdom (UK), European Community (EC) or European Economic Area (EEA) National?			
Have you a current driving licence?			
If YES please give details, including any endorsements e.g. Car, HGV, PSV etc. and any points held.			



**Equality & Diversity Monitoring**

St Luke's is required to collect details about an applicant's age and gender. This information is collected and used for monitoring purposes only.

**Race Relations (Amendment) Act 2000**

In order to comply with these regulations, St Luke's is required to collect details about an applicant's ethnicity. This information is collected and used for monitoring purposes only.

I would describe my ethnic origin as (please tick):			
WHITE - British		WHITE - Irish	
WHITE - Any other White background		ASIAN OR ASIAN BRITISH - Indian	
ASIAN OR ASIAN BRITISH - Pakistani		ASIAN OR ASIAN BRITISH - Bangladeshi	
ASIAN OR ASIAN BRITISH – Any other Asian background		MIXED – White & Black Caribbean	
MIXED – White & Black African		MIXED – White & Asian	
MIXED – Any other mixed background		BLACK OR BLACK BRITISH – Caribbean	
BLACK OR BLACK BRITISH - African		BLACK OR BLACK BRITISH – Any other Black background	
OTHER ETHNIC GROUP - Chinese		OTHER ETHNIC GROUP (please state below)	
Prefer not to say			

**Relationships**

Are you related to a director, or have a relationship with a director or employee of St Luke's?  
If so, please state the relationship:

Please state how you became aware of this vacancy?



**Disability**

*Disability Discrimination Act 1995 and 2005*

The Disability Discrimination Act protects disabled people. The DDA defines disability as a physical or mental impairment with long term, substantial effects on the ability to carry out normal day to day activities. This includes people with long-term health conditions. If you tell us that you have a disability, we can make reasonable adjustments to where you work, your work arrangements and at interview.

Do you consider yourself to have a disability?			
<b>Please tick the type of impairment which applies to you. People may experience more than one type of impairment, in which case you may indicate more than one. If none of the categories apply, please do not mark.</b>			
Physical Impairment	<input type="checkbox"/>	Sensory Impairment	<input type="checkbox"/>
Mental Health Problem	<input type="checkbox"/>	Learning Disability/Difficulty	<input type="checkbox"/>
Long-standing Illness	<input type="checkbox"/>	Prefer not to say	<input type="checkbox"/>
Other (please state)	<input type="checkbox"/>		

**Employment Equality Regulations 2003**

In order to comply with these regulations, St Luke's is monitoring sexual orientation and religion/belief in applications.

<b>Please indicate which term would best describe your sexuality (please tick):</b>			
Lesbian	<input type="checkbox"/>	Gay	<input type="checkbox"/>
Bisexual	<input type="checkbox"/>	Heterosexual	<input type="checkbox"/>
Prefer not to say	<input type="checkbox"/>	Other (please state)	<input type="checkbox"/>

<b>Please indicate your religion or belief (please tick):</b>			
Atheism	<input type="checkbox"/>	Buddhism	<input type="checkbox"/>
Christianity	<input type="checkbox"/>	Hinduism	<input type="checkbox"/>
Islam	<input type="checkbox"/>	Jainism	<input type="checkbox"/>
Judaism	<input type="checkbox"/>	Sikhism	<input type="checkbox"/>
Prefer not to say	<input type="checkbox"/>	Other (please state)	<input type="checkbox"/>



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**Criminal Convictions**

**Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975**

In order to protect certain vulnerable groups within society, St Luke's is exempt from the provisions of the Rehabilitation of Offenders Act 1974 by virtue of the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975.

Applicants are not entitled to withhold any information about convictions, cautions, warnings and reprimands which for other purposes are "spent" under the provisions of the Act. Any information provided will be confidential and will be considered only in relation to posts to which the Order applies. All applicants who are offered employment will be subject to a criminal records check from the Disclosure and Barring Service (DBS) before the appointment is confirmed. This will include details of cautions, reprimands or final warnings, as well as convictions. St Luke's abides by the strict DBS Code of Practice with regard to disclosure whereby any conviction disclosure would not necessarily be a bar to employment but failure to reveal information relating to any convictions could lead to withdrawal of an offer of employment.

Have you at any time received or had pending a criminal conviction, caution, warning, reprimand or bind-over?	
<b>If so, please give details:</b>	
Does your name appear on the Protection of Children Act List?	
Does your name appear on the Protection of Vulnerable Adults List?	

**Declaration** (please read this carefully before signing this application)

The information in this section is true and complete. I understand that any deliberate omission, falsification or misrepresentation in the application form will be grounds for rejecting this application, to withdraw any employment contract offered or, if employed, subsequent dismissal without notice if employed by St Luke's. Where applicable, I consent that St Luke's can seek clarification regarding professional registration details.

Name		Date	
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PLEASE NOTE: If completing this form online, all shortlisted candidates will be asked to sign a copy of the application form at interview.

**Details entered on this part of the form will be held in the HR Department and will not be made available to the shortlisting panel.**





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**Membership of professional bodies**

Include in this section any relevant professional registrations or memberships. If you are registered then please enter the relevant details below; this information will be subject to a satisfactory check.

Name of training school		Pin No.	
Date of qualifying		Expiry	

<b>Please indicate your UK professional registration status (please tick):</b>	
I do not have the relevant UK professional registration	
I have current UK professional registration	
UK professional registration required and applied for	
UK professional registration required but not applied for	
I am a student	

Professional body membership 1		Professional body membership 2	
Name		Name	
Membership registration/ pin number		Membership registration/ pin number	
Expiry/renewal date		Expiry/renewal date	

If you are a member of more professional bodies, please attach an extra sheet.

**Fitness to Practice – (If Professionally Registered)**

If you are applying for a post that requires professional registration you are required to provide the following information:

Are you currently the subject of a fitness to practise investigation or proceedings by a licensing or regulatory body in the UK or in any other country?	
Have you been removed from the register or have conditions been made on your registration by a fitness to practise committee or the licensing or regulatory body in the UK or in any other country?	



**Employment History**

Please record below the details of your previous employment, (minimum of 3 years employment history required), beginning with the most recent first. Please record below the details of your current or most recent employer:

**Employer name and address:**

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**Employment Details:**

Job title	
Employer's telephone number	
Type of business	
End date (if Applicable)	
Grade	
Salary	
Reporting to (job title)	
Period of notice	
Reason for leaving	

Description of duties and responsibilities:

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**References**

For all positions you must provide a minimum of two references covering a minimum of three years employment/training. If you need to provide any more previous referee details, please attach an additional sheet.

- Please state the names and contact details of the people who have agreed to supply references, covering a minimum of three years employment/training.
- If you are or have been employed, these should include your two most recent employers, your line manager or someone in a position of responsibility who can comment on your work experience, competence, personal qualities and suitability for the post.
- If you are a student please provide contact details of a teacher at your school, college or university.
- If you have not been in employment for some time but have had previous employment, then you should seek one reference from your last known

employer and a personal reference from a person of some standing within your community i.e. doctor, solicitor, MP

- Where it is not possible to obtain any employer reference at all then please obtain two personal references.
- Where no personal reference can be obtained then references should be sought from personal acquaintances not related to or involved in any financial arrangement with you.
- Personal references such as friends and relatives are not acceptable.

Please note, all reference requests will be sought and employment histories verified by the HR Department, therefore, please ensure that you provide full contact details. Referees will be contacted prior to interview, unless you indicate otherwise.

Referee 1		Referee 2	
Title		Title	
Surname		Surname	
First name		First name	
Job title		Job title	
Address line 1		Address line 1	
Address line 2		Address line 2	
Address line 3		Address line 3	
Town/city		Town/city	
County		County	
Postcode		Postcode	
Country		Country	
Telephone		Telephone	
Fax		Fax	
Email		Email	
Relationship		Relationship	
Can the referee be approached prior to interview?		Can the referee be approached prior to interview?	



**Supporting statement**

Please describe below why you are interested in this post, your main achievements to date, the strengths you would bring to this post and any other information relevant to your application. This could include hobbies and pastimes that include positions of responsibility. Please attach an extra sheet if necessary.



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A large, empty rectangular box with a thin black border, intended for providing additional information or answers.

**If you need any more space, please attach an additional sheet.**



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**Declaration**

**Please read this carefully before signing this application:**

The information in this section is true and complete. I understand that any deliberate omission, falsification or misrepresentation in the application form will be grounds for rejecting this application, to withdraw any employment contract offered or, if employed, subsequent dismissal without notice if employed by St Luke's. Where applicable, I consent that St Luke's can seek clarification regarding professional registration details.

Name		Date	
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**PLEASE NOTE: If completing this form online, all shortlisted candidates will be asked to sign a copy of the application form at interview.**

**If returning by post, please send your completed form to:**

HR Department  
St Luke's Hospice  
Little Common Lane  
Sheffield  
S11 9NE

**If returning electronically, please email your completed form to:**

recruitment@hospicesheffield.co.uk