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| **Data Protection Information**  **The information which you have supplied on this form will be processed and may be held on computer. The information will also be used for equality monitoring and statistical purposes. By submitting this form, you will be deemed to have given your consent to this, including information which may be considered to be sensitive and personal.** |

William Simpsons is an equal opportunities employer. We would be grateful if you would complete this page of the application form and return it to us. It will be detached from the rest of your application before short listing.

This home is committed to ensuring that staff are allowed to develop so as to maximise their individual potential without limit on the opportunities available to them at the home.

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***Please tick as appropriate and write in details where appropriate:***

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| Ethnicity: How would you describe yourself, are you: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| White | |  | | |  | | African | | | | |  | | |  | | European | |  | |  | | Asian | |  | |  | | Chinese | |  |  | |
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| English | |  | | |  | | Scottish | | | | |  | | |  | | Hispanic | |  | |  | | Indian | |  | |  | | Welsh | |  |  | |
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| African Caribbean | | | | | | | |  |  | | | | | | | | Pakistani | |  | |  | | Irish | |  | |  | | Mixed | |  |  | |
| Other, Please specify: ……………………………………………………………… | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Age: Which age range do you sit within? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 16-21 |  | |  | | | 22-25 | | | |  | | |  | | | 26-30 | |  | |  | | 31-35 | |  | |  | | 36-40 | |  | | |  |
|  |  | |  | | |  | | | |  | | |  | | |  | |  | |  | |  | |  | |  | |  | |  | | |  |
| 41-50 |  | |  | | | 51-60 | | | |  | | |  | | | 60-65+ | |  | |  | |  | |  | |  | |  | |  | | |  |
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| Gender: Are you: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Male | |  | |  | | | Female | | | |  | | |  | | | | | | | | | | | | | | | | | | | |
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| Disability: Do you have a disability? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Yes | |  | |  | | | No | | | |  | | |  | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

If you answered Yes to this question, please give brief details (below and continuing overleaf) of any adjustments you would like us to make to our selection arrangements (including our interview location and facilities) as a result of your disability status

*(please continue over the page if more space is required)*

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