**Glastonbury Health Centre**

**Equal Opportunity Policy Form**

We are an equal opportunity Employer.

We have a policy to ensure no job applicant or Employee receives less favourable treatment on the grounds of sex, disability, marital status, civil partnership, colour, race, or ethnic origin, age, nationality, religion, religious or philosophical belief, sexual orientation, gender re-assignment or is disadvantaged by conditions or requirements that cannot be shown by us to be justifiable.

We frequently review selection criteria and procedures to ensure that individuals are selected, promoted and treated on the basis of their relevant merits.

All our Employees are given equality of opportunity and are encouraged to progress within the Practice.

We are committed to an ongoing programme of action to make this policy fully effective.

To ensure this policy is fully and fairly implemented and monitored and for no other reason, would you please complete the table overleaf and return this form to us, together with your Application for Employment Form*.*

The Equal Opportunity form will be separated from the application form upon receipt and prior to any applications being assessed for interview purposes.

**Glastonbury Health Centre**

**Equal Opportunity Policy Form**

***(Please tick the box / enter the information to the right of your selection)***

**I would describe my sex and ethnic origin as follows:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Male** |  | **Female** |  |

|  |
| --- |
| **A. WHITE** |
| **British** |  | **Irish** |  | **Any other White background (Please specify)** |  |

|  |
| --- |
| **B. MIXED** |
| **White and Black Caribbean** |  | **White and Black African** |  | **White and Asian** |  | **Any other Mixed background (Please specify)** |  |

|  |
| --- |
| **C. ASIAN OR ASIAN BRITISH** |
| **Indian** |  | **Pakistani** |  | **Bangladeshi** |  | **Any otherAsianbackground(Please specify)** |  |

|  |
| --- |
| **D. BLACK OR BLACK BRITISH** |
| **Caribbean** |  | **African** |  | **Any other Black background (Please specify)** |  |

|  |
| --- |
| **E. CHINESE OR OTHER ETHNIC GROUP** |
| **Chinese** |  | **Any other (Please specify)** |  |

|  |
| --- |
| **F. ARAB OR MIDDLE EASTERN DESCENT** |
| **Arab** |  | **North African** |  | **Iraqi** |  | **Kurdish** |  |
| **Any other Middle Easternbackground (Please specify)** |  |

**When completed, please return this form to us, together with your Application for Employment Form.**