

EQUAL OPPORTUNITIES IN EMPLOYMENT

The University of Liverpool is an equal opportunities employer. We need to carry out equalities monitoring in order to meet our statutory obligations and to make sure our Human Resources processes are working to promote equality for all applicants and staff. Please help us do this by marking ALL appropriate boxes and returning this form to Human Resources (Recruitment), either with your Application Form or by itself if you have already applied.

Post applied for

Department									lob Ref:			
Closing Date												
Where did you s	see the post	advertis	ed?									
			<u> </u>									
Equal Oppo	rtunities N	onito	ring Ques	tions								
1. My Gender	is Male		Female		Other		2.	My date of (DD/MM/)				
3 Is your Gender Identity the same as the gender you were originally assigned at birth?				Yes		No						
	ct on a perso	n's abil	0) defines a d ity to carry ou					pairment whi	ch has a sub	ostantial	and long	-term
No known disab	No known disability Physical impairment or mobility issues (such as					00)						
Specific learning disability (such as dyslexia or dyspraxia)					difficulty using arms or using a wheelchair or crutches) Deaf or serious hearing impairment							
General learning disability (such as Down's syndrome)					Blind or serious visual impairment							
Cognitive impairment (such as autistic spectrum disorder or resulting from head injury)					Mental health condition (such as depression or schizophrenia)							
Long-standing illness or health condition (such as cancer, HIV, diabetes, or epilepsy)					Other type of disability							
Guaranteed Int	erview Sche	me										
O SABLE	them on the interview m your applic this form w	eir abiliti ay subs ation to th your		ible crite alidate a d under	ria woul ny offer the sch	d not be a of employ eme, plea	ipplied, ar ment or c se mark X	ny false decla contract of er (in the yes l	aration of dis nployment. S box below ar	ability to Should y nd ensur	o obtain a ou wish	
I declare I have Interview Sche	•	, as def	fined by the	Equality	Act ab	ove, and	wish to a	pply for the	Guarantee	d		
5 My Nationa	lity is									,		

White	Black/African/Caribbean/British	Other ethnic group
English, Welsh, Scottish, British	Black or Black British - Caribbean	Arab
Irish	Black or Black British - African	Other Ethnic background
Gyspy or Traveller	Other Black background	Information refused
Any other white background	_	
Asian/Asian British	Mixed / Multiple ethnic group	
Asian or Asian British - Indian	Mixed - White and Black Caribbean	
Asian or Asian British - Pakistani	Mixed - White and Black African	
Asian or Asian British - Bangladeshi	Mixed - White and Asian	
Chinese	Other Mixed background	
Other Asian background		
7 What is your Religious Belief? (This is a	n optional question)	
No religion or belief	Muslim	
Christian	Sikh	
Buddhist	Any other religion or belief	
Hindu	Prefer not to say	
Jewish		
8 What is your Sexual Orientation? Sexual (This is an optional question).	l Orientation means who you are emotional	lly attracted to.
Straight / Heterosexual	Gay Man	
Gay Women / Lesbian	Bisexual	
Other	Prefer not to say	
Personal Details		
Surname / Family Name:		
First Names (in full):		Title (Mr/Mrs/Dr/Prof etc)
Address:		
	Postcode:	
Data Protection - I agree to the University the purpose of monitoring the University's		
Signed (type name)	D	Pate
	. 40	
MINDFUL	Stonew	/all











APPLICANT INFORMATION FORM FOR APPLICATIONS FOR ACADEMIC AND ACADEMIC-RELATED POSTS

Please return to Human Resources (Recruitment),
The University of Liverpool, Hart Building, Mount Pleasant, Liverpool L3 5TQ
E-MAIL: jobs@liv.ac.uk

Applications should comprise:

- This form with all sections completed in full
- A copy of your full curriculum vitae, including a list of publications where appropriate
- A statement indicating the reasons for applying for this post, and how your training and experience are relevant

Please use black ink or type			
POST DETAILS			
Post Applied for		Job R	ef:
Department			
Where did you see the post advertised ?			
PERSONAL DETAILS			
Surname/Family Name			Title (Mr/Miss/Mrs/Ms/Dr/Prof etc.)
First names (in full)			1
Address			
		Nationality	
Postcode			
Tel.: Home		E-mail (if any)	
Work			
Would you require a Certificate of Sponsorsh appointment? (If you are a Non-EEA National require a Certificate of Sponsorship please in why).	al and do not		National Insurance No:
DETAILS OF PRESENT EMPLOYME	NT		1
Name and Address of Present Employer	Position held		Start date in this employment
Current Salary	Period of Notice	e Required	
•			

You are not required to give details of a 'spent' conviction as provided by the Rehabilitation of Offenders Act

			CONFIDENTIAL
1974 unless the post is one that involves know all convictions. Please refer to the		vulnerable adults v	where we need to
Are there any dates when you would no	t be available for interview? If ye	es, please give det	ails Yes No
FOR MEDICAL AND DENTAL CL	INICAL STAFF ONLY:		
G.M.C. Number	National Training Number	Pay Band Su	upplement
REFEREES Please give the names and addresses of should be your present or most recent em NOTE: Unless indicated otherwise, we process	ployer. Referees should not be	related to you	•
Name and Address			May this referee now be approached?
Tel. No: In what capacity does this referee know (eg employer, tutor, friend etc) 2.	E-mail: you ?		Yes No
Tel. No: In what capacity does this referee know (eg employer, tutor, friend etc) 3.	E-mail: you ?		Yes
Tel. No: In what capacity does this referee know (eg employer, tutor, friend etc)	E-mail: you ?		Yes
DECLARATION The information I have given on this form, and on a notice, should I knowingly mislead during the select Data Protection: I agree to the University of Live obtain from me or other sources, for the purpose or	tion process rpool using personal data contained in t	his application, or other	

Signature (type name).
March 09

PLEASE PASTE A COPY OF YOUR STATEMENT AND CURRICULUM VITAE AND, IF APPROPRIATE, A LIST OF PUBLICATIONS, IN THE SPACE BELOW BEFORE SENDING THE APPLICATION BY POST OR BY E-MAIL TO THE ADDRESS AT THE TOP OF THE FORM.
ALTERNATIVELY YOU MAY ATTACH A SEPARATE CURRICULUM VITAE AND STATEMENT TO THIS FORM OR TO YOUR E-MAIL