



### EQUAL OPPORTUNITIES MONITORING FORM

APPLICANT NAME	
POSITION APPLIED FOR	
CLOSING DATE	

### REHABILITATION OF OFFENDERS ACT

Have you ever been convicted of a criminal offence?	YES	NO
Have you any prosecutions pending?	YES	NO
If yes, please give details of dates and of offence(s) and sentence		

### BAME DECLARATION

<p>Do you consider your ethnicity to fall within one of the following definitions:</p> <p><input type="checkbox"/> Black</p> <p><input type="checkbox"/> Asian</p> <p><input type="checkbox"/> Other Minority Ethnic</p> <p><input type="checkbox"/> No</p>
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