

## Equality of Opportunity

**Infinity Care Ltd** is committed through its Equal Opportunities Policy to ensure that all applicants are considered on a fair, unbiased and lawful basis. **Infinity Care** requires information about sex, ethnic origin, age and disability, to help monitor this policy. The following information will only be used for this purpose, and will be treated in the strictest of confidence.

Name:

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Title of Post Applied for:

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<b>Ethnic Origin</b>	
I would describe my ethnic origin as: (Please tick appropriate box)	
<b>White</b>	<input checked="" type="checkbox"/>
- British	<input type="checkbox"/>
- Irish	<input type="checkbox"/>
- Other White (Please specify)	<input type="checkbox"/>
<b>Black or Black British</b>	<input checked="" type="checkbox"/>
- Caribbean	<input type="checkbox"/>
- African	<input type="checkbox"/>
- Other Black (Please specify)	<input type="checkbox"/>
<b>Asian or Asian British</b>	<input checked="" type="checkbox"/>
- Indian	<input type="checkbox"/>
- Pakistani	<input type="checkbox"/>
- Bangladeshi	<input type="checkbox"/>
- Other Asian (Please specify)	<input type="checkbox"/>
<b>Chinese or other Ethnic Group</b>	<input checked="" type="checkbox"/>
- Chinese	<input type="checkbox"/>
- Other Ethnic Group (Please specify)	<input type="checkbox"/>
<b>Mixed</b>	<input checked="" type="checkbox"/>
- White & Black Caribbean	<input type="checkbox"/>
- White & Black African	<input type="checkbox"/>
- White and Asian	<input type="checkbox"/>
- Other Mixed (Please specify)	<input type="checkbox"/>

### Sex

(Please tick the appropriate box)

Male	<input type="checkbox"/>
Female	<input type="checkbox"/>

### Age

In years

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### Date of Birth

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### Disability

(Please tick the appropriate box)

Do you consider yourself disabled?

Yes	<input type="checkbox"/>
No	<input type="checkbox"/>

### Where did you see this vacancy advertised?

(Please tick appropriate box)

Local Newspaper	<input type="checkbox"/>
Vacancies Bulletin	<input type="checkbox"/>
Professional Journal	<input type="checkbox"/>
Job Centre	<input type="checkbox"/>
Internet (Please detail website below)	<input type="checkbox"/>
www.	<input type="checkbox"/>
Other (Please detail below)	<input type="checkbox"/>
	<input type="checkbox"/>

For office use only:

Date filed:

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Signature:

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