



APPENDIX B

Bij: Dataverzameling ter bestrijding van discriminatie aan universiteiten: een verkenning van buiten Nederland toegepaste vragenlijstmethoden

Deze bijlage bevat de enquêteformulieren die zijn verzameld en geanonimiseerd. Merk op dat we vijf volledige enquêteformulieren en een onvolledig formulier hebben ontvangen. De overige drie reacties die we op onze e-mails ontvingen, bevatten andere vormen van informatie, bijvoorbeeld een link naar een website of diversiteitsrapport waarin een proces wordt beschreven. Aan deze negen reacties hebben we andere informatie toegevoegd die we online konden vinden.

Deze bijlage B hoort bij het rapport: *Dataverzameling ter bestrijding van discriminatie aan universiteiten: een verkenning van buiten Nederland toegepaste vragenlijstmethoden*. Sharon van Geldere, Rozemarijn Stadens en Linnet Taylor (2022). De Jonge Akademie, Amsterdam. Zie: www.dejongeakademie.nl

Canada A

WORKFORCE DIVERSITY QUESTIONNAIRE*

The [institution] is committed to having an equitable, diverse, and inclusive workforce, since our teaching, scholarship and other activities take place in a highly diverse society and because a diverse university workforce contributes to varied ideas and perspectives, enriching teaching, scholarship and other activities.

To assess progress toward this commitment, we are conducting a demographic census to collect data on relevant equity, diversity, and inclusion measures. Specifically, we are asking you to answer a short set of questions to help us understand how you identify in each instance. We are asking all university employees to participate to help us obtain an accurate picture of our workforce. Resulting data can then be used to conduct statistical analysis, to identify areas where we may not be meeting our objectives.

Completing this census is completely voluntary. If you do not wish to respond, please check the box at the beginning of the census. You will also have the option to decline to answer any of the specific questions. The census will take less than five minutes to complete.

Thank you for assisting the university with its commitment to having an equitable, diverse, and inclusive workforce.

If for any reason(s) you do NOT wish to complete this survey, please check the box below:

I wish to NOT take the survey (this will bring you to the end of the survey)

Would you like to share your reason of declining the survey?

GENDER IDENTITY

1. Do you identify as (choose all that apply):

Gender-Fluid and/or Non-Binary

Man

Transgender

Two-Spirit¹

Woman

Another gender identity (please specify in the box below):

I prefer not to answer

¹ Two-Spirit is an umbrella term used by many Indigenous people to describe their sexual, gender, and/or spiritual identity.

* Introduction has been summarized.

SEXUAL ORIENTATION

The options listed below are based on the [institution] Human Rights Commission's definition of sexual orientation.

2. Do you identify as (choose all that apply):

Asexual

Bisexual

Gay

Heterosexual

Lesbian

Queer

Two-Spirit

Another orientation (please specify in the box below):

I prefer not to answer

INDIGENOUS / ABORIGINAL PEOPLES

In accordance with Statistics Canada and the Canada Employment Equity Act, "Aboriginal" is defined by the Government of Canada as First Nations (Status, Non-Status, Treaty), Métis, or Inuit, and was established by the federal government as an umbrella term for diverse Indigenous peoples in Canada. However, this may not be how you identify. Instead, you may identify as Cree, Blackfoot, Mi'kmaq, Dene, or Nakota Sioux, etc. All of these identities are part of the umbrella term of Aboriginal Peoples. You may also identify as an Indigenous person from outside of Canada.

3. Do you identify as an Indigenous / Aboriginal person?

Yes

No

I prefer not to answer

4. Please indicate your geographic origin. (choose one only)

Indigenous / Aboriginal from Canada

Indigenous / Aboriginal from the United States

Indigenous / Aboriginal from another country.

I prefer not to answer

5. Please indicate which apply to you (choose all that apply):

First Nations (both Status and Non-Status Indians)

Inuk (Inuit) (within Canada)

Métis (within Canada)

Another (please specify in the box below):

I prefer not to answer

6. What Nation(s) do you belong to? (please specify in the box below):

I prefer not to answer

MEMBER OF A VISIBLE MINORITY / PERSON OF COLOUR

The Government of Canada's Canada Employment Equity Act and Statistics Canada both define visible minorities as persons – other than Aboriginal peoples – who are non-white in colour.

General groupings defined by Statistics Canada for the visible minority variable are included below.

We recognize that there may be a preference to instead identify as a “person of colour,” or by an individual’s race or ethnicity. However, for the purposes of this question, please use the definition provided by the Canada Employment Equity Act and Statistics Canada.

7. Do you identify as:

Indigenous / Aboriginal

White

Visible Minority

I prefer not to answer

8. Please indicate which apply to you (choose all that apply):

Arab

Black

Chinese

Filipino

Japanese

Korean

Latin American

South Asian (e.g., Indian, Pakistani, Sri Lankan, etc.)

Southeast Asian (e.g., Vietnamese, Cambodian, Laotian, Thai, etc.)

West Asian (e.g., Iranian, Afghan, etc.)

Another (please specify in the box below):

I prefer not to answer

COUNTRY OF BIRTH AND LANGUAGE

9. Where were you born?

Canada

Outside of Canada (please specify in the box below):

I prefer not to answer

10. What is the language that you first learned at home in childhood?

English

French

Other language (please specify in the box below):

I prefer not to answer

11. Do you have at least a basic proficiency in speaking, reading, writing, and/or understanding English, French, and/or other languages? (choose all that apply)

CHECK IF "YES"

English French Other Language(s)

- Speaking
- Reading
- Writing
- Understanding

AFFILIATION

I prefer not to answer

BELIEF SYSTEM / RELIGIOUS

Census studies and surveys have found that religious affiliation is an important element of identity. Therefore, understanding this relationship can complement other equity, diversity, and inclusion data in a meaningful way.

12. What belief system(s) / religious affiliation(s) do you identify with? (choose all that apply)

CHECK IF "YES"

- Agnosticism
- Atheism
- Bahá'í
- Buddhism
- Christianity
- Confucianism
- Hinduism
- Indigenous Spirituality
- Islam
- Jainism
- Judaism
- Paganism
- Shintoism
- Sikh
- Secular Humanism
- Spiritual, not Religious
- Taoism
- Other (please specify in the box below)
- No Religious Affiliation
- I prefer not to answer

RELATIONSHIP & CAREGIVER STATUS

We are collecting relationship and caregiver data because this information can affect things such as employer-supported health and dental benefits plans (for individuals, partners and/ or children), work/life balance, commitments outside of work, university-provided employee services, etc. Learning more about the items below can therefore lead to more comprehensive analysis.

13. Which of the following best describes your current relationship status?

- Common law (living as a couple but not legally married)
- Divorced
- Legally married
- Separated, but still legally married
- Single (never legally married)
- Widowed
- I prefer not to answer

14. Do you have any dependents (including children and/or adults) for whom you are a parent / guardian / primary caregiver?

- Yes
- No
- I prefer not to answer

15. For how many dependents in each age group are you a parent / guardian / primary caregiver?

- 0 to 12 years
- 13 to 17 years
- 18 to 60 years
- over 60 years
- I prefer not to answer

PERSONS WITH DISABILITIES AND DEAF PERSONS

According to the definition used by the Government of Canada’s Federal Contractors Program, a person with a disability is someone who has a “long-term or recurring physical, mental, sensory, psychiatric or learning impairment(s)” (for the purposes of this questionnaire “long term” is defined as lasting more than six months). This person also considers themselves to be disadvantaged in employment by reason of that disability, or believes that an employer or potential employer is likely to consider them to be disadvantaged in employment by reason of that disability. This also includes persons with disabilities who have been accommodated in their current job or workplace (e.g., by the use of technical aids, changes to equipment or other working arrangements).

16. Given the definition above, do you identify as (choose all that apply):

A person with a disability

A Deaf person

Another identity that should be protected on similar grounds as disability (please specify in the box below):

An able-bodied or non-disabled person

I prefer not to answer

17. Please indicate the type(s) of challenges you experience (choose all that apply):

Chronic health condition

Emotional, psychological, or mental health

Hearing

Learning, remembering, or concentrating

Seeing

Stair climbing

Walking distances

Using your hands or fingers, or doing other physical activities

Other (please specify in the box below):

I prefer not to answer

Please feel free to share any comments you may have about this questionnaire

Canada B

[Institution] Employment Equity Census

Introduction

[Institution] recognizes and acknowledges that it is located on the traditional territories of the [x] and [y] nations, and within the lands protected by the [z] agreement.

In keeping with its Statement on Building an Inclusive Community with a Shared Purpose, [institution] strives to embody the values of respect, integrity and collaboration, and therefore has a strong commitment to diversity, employment equity and inclusive excellence.

[Institution] is focused on creating an inclusive workplace for all faculty and staff. The diversity of our community and our workforce is at the core of our innovation and creativity and strengthens our research, teaching and service excellence, as well as our broader learning environment.

In our efforts to fulfill [institution] commitment to diversity, equity and inclusivity, you are invited to complete an employment equity census. Information collected is to support our efforts to promote equity in our hiring practices. The survey is voluntary and will take approximately two minutes to complete.

Your participation in the census is important. The information you provide will give us a better picture of the current diversity of our workforce and will help us to identify what can be done to provide current and future employees with fair and equitable access to employment services and opportunities.

About the Census

- **The census is voluntary.** If you do not wish to complete the census, please check the “*I do not want to complete the census*” box. In addition, each question allows you to select “*I do not wish to answer this question*” as a response
- Completing the census will take approximately two minutes

Protecting your information

- All information collected is confidential
- Your responses will be stored in an isolated table in Mosaic that is separate from your other personal information that cannot be accessed or viewed
- Your responses will be anonymized when they are analyzed and reported in an aggregate form for employment equity purposes
- You can revise your responses to the census at any time, by completing a new census which will update your information

Please visit the Employment Equity website [link] to read more information including:

o Statement on privacy and the collection of employment equity data; and

o Frequently Asked Questions (FAQs)

o How access to the information is restricted

o How the information collected will be used and reported; and

o Information on Canada’s Federal Contractors Program

Need Help?

- If you have questions about completing the census, please contact

[Name], Employment Equity Specialist via email

[email] or phone [number]

Mailing Information

Mail in an envelope marked “Confidential” to: [address]

Name:

Employee ID:

Instructions

[Institution] values diversity and respects the dignity of all persons. We also recognize that terminology and language is evolving. Note that some of the terminology used in the survey is used in compliance and consistency with terminology in the Federal Contractors Program.

Please read the questions below and select all options that refer to you.

A person can belong to more than one designated group.

Consent

• If you do not wish to complete the employment equity census, please check the “*I do not want to complete the census*” box below. In addition, each question allows you to select “*I do not wish to answer this question*” as a response.

I do not want to complete the census

I want to complete the census

1. Indigenous Peoples

For the purposes of employment equity, an Indigenous person is a universal and umbrella term which includes a wide range of communities who are indigenous to their countries.

For the purposes of employment equity do you self-identify as an Indigenous person?

No Yes I do not wish to answer this question

2. Members of Racialized Communities (Members of a Visible Minority)

For the purposes of employment equity, the term “Member of a Visible Minority” is used to describe persons of colour or members of racialized communities. A member of a visible minority in Canada is someone (other than an Aboriginal person as defined in question 1) who self-identifies as non-white in colour or non-Caucasian in racial origin, regardless of birthplace or citizenship. Members of ethnic or national groups (for example: Portuguese, Italian, Greek) would not be considered members of a visible minority unless they also identify as non-white in colour.

For the purposes of employment equity, do you self-identify as a member of a visible minority?

No Yes I do not wish to answer this question

3. Persons with Disabilities

For the purposes of employment equity, the term “Persons with Disabilities” means persons who have a long-term or recurring physical, mental, sensory, psychiatric or learning impairment AND

A. Who consider themselves to be disadvantaged in employment by reasons of that impairment OR

B. Who believe that an employer or potential employer is likely to consider them to be disadvantaged in employment by reasons of that impairment.

This definition includes persons whose functional limitations owing to their impairment have been accommodated in their current job or workplace.

For the purposes of employment equity do you self-identify as a person with a disability?

No Yes I do not wish to answer this question

4. Women

For the purposes of employment equity, Women are a designated group.

For the purposes of employment equity, do you self-identify as a woman?

No Yes I do not wish to answer this question

NOTE: The information collected in the following questions is not a requirement of Canada's Federal Contractors Program but can help the University to develop employment equity strategies that eliminate additional barriers to employment. The information is reported on an aggregate basis and is not shared with the selection committee.

5. Gender Identity and Gender Expression

For the purposes of employment equity, transgender persons are a group that may face employment barriers. Trans or transgender is an umbrella term referring to people with diverse gender identities and expressions that differ from stereotypical gender norms. It includes but is not limited to people who identify as transgender, trans women (male-to-female MTF), trans men (female-to-male FTM), transsexual, Two-Spirit (as it relates to gender identity) or gender non-conforming, gender variant or gender-queer.

For the purposes of employment equity, do you self-identify as a person who is trans, transgender, gender non-conforming, gender variant, gender-queer or an analogous term?

No Yes I do not wish to answer this question

6. Sexual Orientation

For the purposes of employment equity, persons who identify as Lesbian, Gay, Bisexual/Pansexual, Queer, and/or Two-Spirit (as it relates to sexual orientation) are a group that may face employment barriers.

For the purposes of employment equity do you self-identify as a person who is Lesbian, Gay, Bisexual/Pansexual, Queer, Two-Spirit or an analogous term?

No Yes I do not wish to answer this question

New Zealand

Demographics

Gender

Do you identify as lesbian, gay, bisexual, transgender, queer, intersex or Takatāpui (LGBTQITakatāpui+)?

Date of birth

Country of birth

Citizenship

Residency

Are you or your parents/primary guardian(s) from a refugee background?

Ethnicities

New Zealand European

- Māori
- Chinese
- Indian
- Korean
- British and Irish
- -----
- African
- Australian
- Cambodian
- Cook Islands Māori
- Dutch
- Fijian
- Filipino
- German
- Greek
- Italian
- Japanese
- Latin American/Hispanic
- Middle Eastern
- Niuean

- No Response
- Other Asian
- Other Ethnicity
- Other European
- Other Pacific Peoples
- Other Southeast Asian
- Polish
- Samoan
- South Slav
- Sri Lankan
- Tokelauan
- Tongan
- Vietnamese

Disability information

Do you live with the effects of a mental health condition, specific learning disability, long-term medical condition, or other disability or impairment.

South Africa

HR101 Personal Details

Before you begin

- The latest version of this form must be downloaded from the [insitution] forms website: [link]
- This form is completed by an employee for new appointments and re-appointments with a break in service. If completing for the first time, complete the *entire* form. It is not necessary to complete the HR101 form for re-appointments with no break in service and no change in details.
- This form is also completed by an employee when they wish to change their personal details, e.g. address, banking details. In this case, complete the *Event* section, the first seven fields under *Personal details*, other *relevant sections* and sign under *Certification*.

Event

<input type="checkbox"/>	New personal details	If change of personal details, effective from? (DD MM YYYY)		
<input type="checkbox"/>	Change of personal details	<input type="text"/>	<input type="text"/>	<input type="text"/>

Personal details

Department				
Staff number (if previously employed at [institution])		Title		
Last name (Surname)		Previous last name / surname (if applicable)		
First name/s		Nickname / Known as (used to create email address for T1, T2 and permanent staff)		
Note	Nickname/Known as: This field should be completed when a staff member commonly uses a name other than his/her given first name - for example, abbreviations like Lungi instead of Lungile or Chris instead of Christopher. This preferred name will be used in the creation of a [institution] email address – chris.thompson@[institution] - and may be used for other purposes in future.			
Identity or passport number (attach photocopy)		If passport, country of issue (attach photocopy of relevant work, study, refugee or permanent residence permit/s)		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Birth date (DD MM YYYY)		Gender		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Female	<input type="checkbox"/> Male
Country of birth		Nationality		
<input type="text"/>		<input type="text"/>		

Family details (If more than six children, please attach their details in the format given below on a separate sheet of paper)

Marital status		Date of marriage / change of marital status (DD MM YYYY)			
<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	
Family member	Last Name (Surname)	First Name/s	Date of Birth (DDMMYYYY)		Gender (M / F)
Spouse / Partner	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Child 1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Child 2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Child 3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Child 4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Child 5	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Child 6	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Additional personal details

UCT Student number (if applicable)

Employment equity details (Request for race & disability categories used by Department of Labour for Employment Equity reporting)

Last name (Surname)		First name	
Race / ethnic origin		Other race (only applicable if NOT a South African citizen)	
<input type="checkbox"/>	African	<input type="checkbox"/>	Coloured
<input type="checkbox"/>	Indian	<input type="checkbox"/>	White
If a South African citizen but NOT by birth, date of naturalisation			
Do you have a disability?			
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
If yes above, please indicate disability type		Further information on selected disability type	
<input type="checkbox"/>	Visually impaired	<input type="checkbox"/>	Speech impaired
<input type="checkbox"/>	Hearing impaired	<input type="checkbox"/>	Motor impaired
<input type="checkbox"/>	Chronic illness	<input type="checkbox"/>	Psycho-social disability
<input type="checkbox"/>	Other (please provide details under Further information)		
Note	<p>Disability declaration: Employment Equity legislation defines people with disabilities as people who have a long-term or recurring physical or mental impairment which substantially limits their prospect of entry into, or advancement in, employment. (e.g if an arthritic knee means that you can't walk the distances you used to, this may be inconvenient but it does not qualify as a disability. Likewise, wearing spectacles or contact lenses does not render you visually impaired. A person is visually impaired if, despite correction by means of glasses, contact lenses etc., his/her ability to perform tasks or participate in activities is significantly compromised by insufficient visual acuity). Should you have any queries or concerns regarding your disability declaration, please contact the Disability Service [contact information and link] or the HR Practitioner [link] for your area.</p>		

Address details

Permanent residential address		
Unit / flat / complex number	Complex / flat name	
House number	Street name	
Suburb	City	Postal code
Home telephone number		

Emergency contact details

Title	First name/s	Last name (Surname)
Unit / flat / complex number	Complex / flat name	
House number	Street name	
Suburb	City	Postal code
Phone number	Relationship	

Personal contact details

Own cellphone number	Own private email address (Not a [institution] email address, for IRP5 purposes)

Pay information (If you are a WCG/NHLS joint staff member, please do not complete this section)

Last name (Surname)					First name									
Branch code					Branch name					Bank name				
Account number (Attach acceptable proof, see Notes below for details)					Account type (credit cards may NOT be used)									
					<input type="checkbox"/> Current		<input type="checkbox"/> Savings		<input type="checkbox"/> Transmission					
Name of bank account holder					Account holder relationship									
					<input type="checkbox"/> Own		<input type="checkbox"/> Joint		<input type="checkbox"/> 3 rd party					
Tax reference number (starts with 0, 1, 2 or 3)														
<p>N Bank account: Please attach your bank statement (stamped by the bank) or a letter from the bank verifying your account details. For o third party bank accounts, in addition to the bank statement or account details letter as explained above, please attach a letter from the t account holder verifying the staff member is authorised to use the bank account. e Tax reference number: If you do not declare your tax reference number you will not be paid. If you have worked before, please s contact SARS (0800 00 72 77) for your tax reference number. If you don't have a tax reference number, please complete this form in full with your permanent residential address. If you are in a [institution] residence, please supply your home address. On receipt of this form [institution] will make application for a tax number on your behalf.</p>														

[Institution] sole employer declaration

Do you work for less than 22 hours per week?		If yes, is [institution] your sole employer or only source of income?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No (skip to Qualifications)	<input type="checkbox"/> Yes	<input type="checkbox"/> No (skip to Qualifications)
Please sign declaration below only if [institution] is your sole employer and you work less than 22 hours per week.			
I declare that [institution] is, and will be, my ONLY employer for the period from			to
If, for any reason, [institution] should cease to be my sole employer, I confirm that I will advise the University in writing of my change in circumstances.		Employee's signature	Date
<p>N Tax: If less than 22 hrs per week and [institution] is sole employer, taxed according to tax table. o If less than 22 hrs per week and [institution] not sole employer, taxed at 25%. e</p>			

Qualifications (If you have a tertiary qualification, select highest qualification obtained)

From a university			
<input type="checkbox"/> UG Diploma/Cert.	<input type="checkbox"/> Gen 1st Bach. Degree	<input type="checkbox"/> Prof 1st Bach. Degree	<input type="checkbox"/> PG Diploma/Cert.
<input type="checkbox"/> PG Bach. Degree	<input type="checkbox"/> Honours Degree	<input type="checkbox"/> Masters Degree	<input type="checkbox"/> Doctoral Degree
From a technikon			
<input type="checkbox"/> National Certificate	<input type="checkbox"/> Nat. Higher Certificate	<input type="checkbox"/> National Diploma	<input type="checkbox"/> BTech degree
<input type="checkbox"/> Post-dip. Diploma	<input type="checkbox"/> National Higher Dip.	<input type="checkbox"/> Masters Dip in Tech	<input type="checkbox"/> MTech degree
<input type="checkbox"/> Laureatus in Tech	<input type="checkbox"/> DTech degree		

Certification

I certify that all information on this form is true and correct.	Employee's signature	Date

Attachments

- Photocopy of identity or passport document.
- If no South African identity document, photocopy of work, study, refugee or permanent residence permit.
- Acceptable proof of bank account details (bank statement stamped by bank or account verification letter from bank, if third party account then also letter of authorisation from account holder).

Submitting the form

If...	then submit the form to...	to reach HR Administration...
an appointment	your Departmental Administrator or the HR Appointments Office (depending on the route for a particular appointment)	with the associated Appointment form [link] (HR100a/b/c/d).
a change in personal details	your HR Administrator, either in [place] or, in the case of Health Sciences and Humanities, the relevant Faculty Office.	by the 3 rd day of the month in which the change is to be made.

Office use

HR Administrator	Date

UK A

EQUALITY AND DIVERSITY

NEW STARTER FORM

Appointment ID

CONFIDENTIAL

The [institution] is committed to fostering an inclusive culture which promotes equality, values diversity and maintains a working, learning and social environment in which the rights and dignity of all its staff and students are respected.

We collect data on all staff to monitor our progress in promoting equality and to inform any changes that may be needed to our policies, practices and services, as well as for statutory monitoring purposes. Analysis of this data enables us to meet our equality duties as a public sector employer.

Any personal data submitted to the University will be processed in accordance with the GDPR and related UK data protection legislation. Data used for statistical monitoring will be anonymised and published in a way that does not allow individuals to be identified. For further information, see the University's Policy on Data Privacy.

Your information will be retained securely as part of your confidential staff record. You will be able to review and update the information that you have supplied and which is held on the University's HR Information System (HRIS) using HR Self-Service.

For more information on equality and diversity at [institution], including staff networks, training and support available for staff with disabilities, please see: [website].

Please answer the questions below and return to: [email]

Sex (this refers to your legal sex)

Are you: Female Male Prefer not to say

Date of birth:

DD MM YYYY

Disability:

Do you have a disability or long-term medical condition (i.e. a physical or mental impairment that has a substantial and long-term adverse effect on your ability to carry out normal day-to-day activities)? Please see [website] for more information.

Yes (please tick all that apply) No known disability Prefer not to say

- | | |
|--|--|
| 51 <input type="checkbox"/> A specific learning difficulty such as dyslexia, dyspraxia or AD(H)D | 58 <input type="checkbox"/> Blind or serious visual impairment uncorrected by glasses |
| 52 <input type="checkbox"/> General learning disability (such as Down's Syndrome) | 55 <input type="checkbox"/> A mental health condition such as depression, anxiety, bipolar disorder, etc |
| 53 <input type="checkbox"/> A social/communication impairment such as Asperger's syndrome/other autistic spectrum disorder | 56 <input type="checkbox"/> A physical impairment or mobility issues |
| 54 <input type="checkbox"/> A long standing illness or health condition such as cancer, HIV, diabetes, epilepsy, chronic fatigue syndrome, etc | 57 <input type="checkbox"/> Deaf or serious hearing impairment |
| 96 <input type="checkbox"/> A disability, impairment or medical condition not included above (<i>please specify</i>): | 97 <input type="checkbox"/> Prefer not to say |

Nationality: Please state your nationality (including any joint nationality)

Please turn over

Ethnic Origin: Please describe your ethnic origin (tick one box only)

This question is not about nationality, place of birth or country of citizenship. Ethnic origin is a self-defined concept encompassing common ancestry and elements of culture, identity, religion, language and physical characteristics such as colour. The categories are identical to those used in the latest UK census.

White

10.

White - British

10.

White - Irish

10.

Other white background (*please specify*):

Gypsy or Traveller

15 Gypsy or Traveller

Arab

50 Arab

Mixed

41 White and Black Caribbean

42 White and Black African

43 White and Asian

49 Other mixed background (*please specify*):

Black or Black British

21 Black or Black British - Caribbean

22 Black or Black British - African

29 Other black background (*please specify*):

Asian or Asian British

31 Asian or Asian British - Indian

32 Asian or Asian British - Pakistani

33 Asian or Asian British - Bangladeshi

34 Chinese

39 Other Asian background (*please specify*):

Other

80 Any other ethnic background (*please specify*):

98 Prefer not to say

Sexual orientation: What is your sexual orientation?

“Sexual orientation” means a person’s emotional and sexual attraction towards people of the same sex, opposite sex, both sexes, or neither. It is not related to gender identity.

01 Bisexual 02 Gay man 03 Gay woman/lesbian

04 Heterosexual 05 Other (*please specify*): 98 Prefer not to say

Religion and belief (including lack of belief): Please describe your religion or belief, if any

“Religion” includes all religions, as well as a lack of religion. “Belief” means any religious or philosophical belief, or lack of belief. This includes philosophical beliefs such as atheism, agnosticism and humanism. Other beliefs may be protected under equality legislation, provided they meet certain requirements.

01 No religion 02 Buddhist 03 Christian

10 Hindu 11 Jewish 12 Muslim

13 Sikh 14 Spiritual 80 Any other religion or belief (*Please specify*):

98 Prefer not to say

Thank you for completing this form

UK B

Application for Employment

This form has **three parts**:

- You must fill out **Part 1** to provide the information we need to consider your application.
- We only need you to fill out **Part 2** for posts where we have to carry out additional screening procedures. You should only fill it in if we have told you that it needs to be completed.
- **Part 3** is optional but if you fill it out it will help us to make sure that our equal opportunities policy works and that we are advertising in the right places. It will also give us some information that we will need if we employ you. We will separate this part from the rest of the form when we get it. We will not use it as part of the selection process.

Position applied for																					
Department																					
Vacancy reference																					
Applicant reference (office use only)	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>																				

PART 1

PERSONAL DETAILS

Title	Mr / Mrs / Ms / Miss / Dr / Other:
Given name(s)	
Family name	
Current address	
Post code	
Primary telephone	
Secondary telephone	
E-mail address	
Immigration status	<p>Are you a settled worker (i.e. do you have the permanent right to work in the UK – for example as a British or EEA citizen)?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If no, do you already have temporary permission to work in the UK?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, please specify your visa type and visa end date:</p>
UK National Insurance number (where held)	

EDUCATION, QUALIFICATIONS & TRAINING

We offer this application form in alternative formats which can be provided by the department to which you are applying.

Education below degree level

We do not need full details of your GCSEs and A-Levels (or equivalent qualifications). Please give your total number of GCSEs and A-Levels (or equivalents) at grades A*-C.

Please use the Other details section of the table to give any other information which is relevant, for example, if you have a GCSE or A-Level in a subject that is relevant to this job, if you have AS-Levels or if you have overseas qualifications.

The total number of GCSEs (or equivalent) I have at Grade A* to C is	
The total number of A-Levels (or equivalent) I have at Grade A* to C is	
Other details of education below degree level	

Education at or above Degree Level and Training

Starting with the most recent, please give details of your education at or above degree level and any training which is relevant to your application. We may ask you to produce qualification certificates if we ask you to come to an interview.

Subject	Qualification level (if applicable)	Grade (if applicable)	Place of learning	Start date	End date

Professional Body Membership

Please give details of any professional body membership which you hold.

Professional body	
Membership level	
Start date	

CAREER HISTORY

Starting with the present, please give details of your full career history. As well as employment, please include any periods of voluntary work, travel, career breaks and unemployment. If you have worked for the University before, we may ask the relevant department about your employment record.

Start date	End date	Employer	Job title and key responsibilities	Reason for leaving or notice period (where applicable)

SUITABILITY FOR THE ROLE

Please review the requirements of the role and provide evidence of how you meet these, using specific examples. It is often helpful to deal with each requirement under a separate heading. Please do not change the font size used below or type more than three sides (or write more than the equivalent by hand).

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REFERENCES

Please provide details of two people (not relatives or friends) who will each provide an employer's reference. One of these referees must be your current or most recent employer. If you do not have a current or recent employer, please provide details of your lecturer/course tutor/unpaid work employer etc.

First reference

Name	
Position	
Address:	
Telephone number	
E-mail address	
May we contact this referee during the recruitment process and before any offer of employment has been made to you?	Yes <input type="checkbox"/> No <input type="checkbox"/>

Second reference

Name	
Position	
Address	
Telephone number	
E-mail address:	
May we contact this referee during the recruitment process and before any offer of employment has been made to you?	Yes <input type="checkbox"/> No <input type="checkbox"/>

REQUEST FOR REASONABLE ADJUSTMENTS TO THE SELECTION PROCESS

We welcome applications from individuals with disabilities and are committed to ensuring fair treatment throughout the recruitment process. We will make adjustments to enable applicants to compete to the best of their ability wherever it is reasonable to do so, and, if successful, to assist them during their employment. We encourage applicants to declare their disabilities in order that any special arrangements, particularly for the selection process, can be accommodated. Applicants or employees can declare a disability at any time.

If you wish to do so, please enter any reasonable adjustments connected with a disability which you require to be made to the selection process in the box below. If, however, you would prefer to discuss any special arrangements with us, please contact the person specified in the job advert or Further Information document as the point of contact for this vacancy. Alternatively, you may contact the HR Business Manager for the department which you are applying to via [e-mail address]

APPLICANT DECLARATION

Please read the statements below and then sign and date to confirm your acceptance of them.

- I understand how the University will use and store my personal data, having read the section on Applicant Data [link] on the University’s HR web pages.
- I confirm that the information I have given in this application for employment form and any supporting documents is correct and complete.
- I understand that failure to disclose any relevant information or the provision of false information may lead to dismissal / withdrawal of any offer of employment made to me.
- I understand that the University may check all or any of the information provided as part of my application or given in references.
- I understand that an appointment, if offered, will be subject to the receipt of references, and the outcome of any relevant pre-employment checks, which the University regards as satisfactory.

Signature _____ Date _____

PART 2

INFORMATION FOR ADDITIONAL SCREENING PURPOSES (SELECTED APPLICATIONS ONLY)

For some jobs, we have to make extra checks to ensure that applicants are suitable and/or that it is legal for us to employ them. If such checks apply to this job then we will have asked you to complete one or more sections of Part 2 in the advert or Further Information document for the vacancy. Do not complete any section of Part 2 unless we tell you that you must. If you are not clear about what you have to do, please ask the department to which you are applying.

Section A: for applications to positions which are eligible for a security check

By making this application, I confirm that:

- I understand that any offer of employment from the [institution] or this security-sensitive position will be conditional upon the satisfactory outcome of security screening checks that are required for, and relevant to, the appointment.
- If I receive a conditional offer of employment for this position, I will consent to undergoing required security screening checks, conducted by the University and/or a third party external security screening service acting on behalf of the University.
- I agree that my name, telephone number and email address may be provided to a third party external security screening service acting on behalf of the University once I have accepted any conditional offer of employment for this position so that they may contact me to initiate the screening process.
- If applicable, I have provided any details regarding my background and security matters that I believe the University should be aware of in the box below.

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Section B: for applications to positions which are eligible for a Disclosure and Barring Service check

You are applying for a job which is exempt from the provisions of the Rehabilitation of Offenders Act 1974. This means that we will conduct a criminal records check on the successful applicant through the Disclosure and Barring Service (DBS – <https://www.gov.uk/government/organisations/disclosure-and-barring-service>).

You must now disclose any pending criminal proceedings, cautions or convictions against you (spent and unspent) which are not “protected”. Protected matters – usually old, minor cautions and convictions – will be filtered out when the DBS responds to our request for a check and you need not disclose them. The DBS has guidance on which cautions/convictions are subject to filtering: https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/240164/Filtering_guidance_v1_5.pdf.

If the role you are applying for involves working with children or adults in regulated activity, the law requires that you must also inform us if you have been barred from such employment.

If you do not disclose now something that is revealed by the DBS check then we may withdraw any conditional offer we have made (or dismiss you if you have begun employment), and we may report you to the DBS.

We will treat the information you provide to us here confidentially and it will not be used unfairly against you. Nothing you declare here will automatically prevent you from being appointed (unless required by law). We may wish to discuss it with you if you are invited to interview. Any information revealed through the DBS check will also be discussed with you.

<p>Do you have any spent or unspent cautions or criminal convictions that are not protected in law?</p> <p>Please note: the filtering rules available at https://www.gov.uk/db define which convictions/cautions are protected.</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If ‘YES’ please provide further information:</p>
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<p>Do you have any criminal proceedings pending against you?</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If 'YES' please provide further information:</p>
<p>Have you been barred from working with children in regulated activity?</p> <p>Please note: you must only answer this question if you are applying for a position that involves regulated activity with children.</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If 'YES' please provide further information:</p>
<p>Have you been barred from working with adults in regulated activity?</p> <p>Please note: you must only answer this question if you are applying for a position that involves regulated activity with adults.</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If 'YES' please provide further information:</p>

Section C: for applications to positions which are eligible for a basic disclosure

You are applying for a security-sensitive role. We will conduct a basic disclosure on the successful applicant through the [Disclosure Scotland](#). You must now disclose any convictions you have that are unspent under the Rehabilitation of Offenders Act 1974 (as amended on 10 March 2014). Please see the [Ministry of Justice's web pages](#) for further information about when convictions are considered unspent.

If you do not disclose now something that is revealed by the basic disclosure then we may withdraw any conditional offer we have made (or dismiss you, if you have begun employment).

We will treat the information you provide to us here confidentially and it will not be used unfairly against you. Nothing you declare here will automatically prevent you from being appointed (unless required by law). We may wish to discuss it with you if you are invited to interview. Any information revealed through the check will also be discussed with you.

<p>Do you have any convictions that are unspent under the Rehabilitation of Offenders Act 1974 (as amended on 10 March 2014)?</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If 'YES' please provide further information:</p>
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PART 3

MEDIA AND EQUAL OPPORTUNITIES MONITORING (OPTIONAL)

The University is an equal opportunities employer and is committed to treating all job applications on their merits. We will use the information collected from this optional part of the application for statistical and monitoring purposes so that we can make sure that our equal opportunities policy is working. We will separate this part from the rest of the form when we get it. We will not use it as part of the selection process. Sensitive information will be used by the University to generate anonymised statistics that will never be presented in a form that allows individuals to be identified.

There is an option to tick “prefer not to say” for sensitive questions. If you do not provide any answer for a question, then we treat you as having ticked “prefer not to say”.

If we employ you, we will have to know your gender and date of birth in order to make sure you pay the right amount of tax and National Insurance contributions. Where the post you have applied for has a retirement age, we will also use your date of birth to work out your expected date of retirement. If you choose not to provide information on your gender and date of birth now, we will ask you for it again upon appointment.

If you are appointed, we have to provide some of this information to the Higher Education Statistics Agency (HESA – <http://www.hesa.ac.uk/>) without your name being associated with it.

Vacancy reference																					
Post title																					
Applicant reference (office use only)	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>																				

Advertising Source

Where did you first learn about this vacancy?	
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Gender

What is your gender?	<input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Prefer not to say
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Date of Birth

What is your date of birth?	__/__/____ <input type="checkbox"/> Prefer not to say
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Nationality

Which country defines your national identity?	Country: _____ <input type="checkbox"/> Prefer not to say
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Ethnic Origin

HESA tells us what categories we have to use when we collect ethnicity data. In addition, the Equality and Human Rights Commission recommends these categories. Our use of these categories does not mean that the University thinks that they are the most appropriate.

What is your background?	<p>White:</p> <input type="checkbox"/> British <input type="checkbox"/> Irish <input type="checkbox"/> White background – other
	<p>Mixed:</p> <input type="checkbox"/> White and Black Caribbean <input type="checkbox"/> White and Black African <input type="checkbox"/> White and Asian <input type="checkbox"/> Mixed background – other
	<p>Asian or Asian British:</p> <input type="checkbox"/> Indian <input type="checkbox"/> Pakistani <input type="checkbox"/> Bangladeshi <input type="checkbox"/> Asian background – other
	<p>Black or Black British:</p> <input type="checkbox"/> Caribbean <input type="checkbox"/> African <input type="checkbox"/> Black background – other
	<p>Chinese:</p> <input type="checkbox"/> Chinese
	<p>Arab</p> <input type="checkbox"/> Arab
	<p>Gypsy or Traveller</p> <input type="checkbox"/> Gypsy or Traveller
	<p>Other ethnic group:</p> <input type="checkbox"/> Other ethnic group
	<p>Prefer not to say:</p> <input type="checkbox"/> Prefer not to say

Disability

HESA tells us what categories we have to use when we collect disability data. Our use of these categories does not mean that the University thinks that they are the most appropriate.

Do you regard yourself as in any way disabled?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Prefer not to say
If yes, what is the nature of your disability?	<p>Please tick the appropriate box. If you experience more than one type of impairment, please tick the box next to all of the types that apply. If your disability does not fit any of these types, please tick other.</p> <input type="checkbox"/> Specific learning disability (such as dyslexia or dyspraxia) <input type="checkbox"/> General learning disability (such as Down’s Syndrome) <input type="checkbox"/> Cognitive impairment (such as autistic spectrum disorder or resulting from head injury) <input type="checkbox"/> Long-standing illness or health condition (such as cancer, HIV, diabetes, chronic heart disease, or epilepsy) <input type="checkbox"/> Mental health condition (such as depression or schizophrenia) <input type="checkbox"/> Physical impairment or mobility issues (such as difficulty using arms or using a wheelchair or crutches) <input type="checkbox"/> Deaf or serious hearing impairment

	<input type="checkbox"/> Blind or serious visual impairment <input type="checkbox"/> Two or more impairments and/or disabling medical conditions <input type="checkbox"/> A social/communication impairment such as Asperger's syndrome/other autistic spectrum disorder. <input type="checkbox"/> Other type of disability not listed above
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Religious beliefs

What are your religious beliefs?	<input type="checkbox"/> Buddhist <input type="checkbox"/> Christian <input type="checkbox"/> Hindu <input type="checkbox"/> Jewish <input type="checkbox"/> Muslim <input type="checkbox"/> No religion <input type="checkbox"/> Sikh <input type="checkbox"/> Spiritual <input type="checkbox"/> Any other religion or belief <input type="checkbox"/> Prefer not to say
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Sexual orientation

What is your sexual orientation?	<input type="checkbox"/> Bisexual <input type="checkbox"/> Gay man <input type="checkbox"/> Gay woman / lesbian <input type="checkbox"/> Heterosexual <input type="checkbox"/> Other <input type="checkbox"/> Prefer not to say
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Gender identity

What is your gender identity?	<input type="checkbox"/> Gender identity is the same as the gender originally assigned at birth <input type="checkbox"/> Gender identity is different to the gender originally assigned at birth <input type="checkbox"/> Prefer not to say
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Online applications

The University has a system which allows some jobs to be applied for online. The system isn't yet in use for every job, so please answer this question **only** if you have asked for a paper application form because you cannot use our online system. This will help us to improve the system so that more people can use it in future.

Why do you need a paper application form?

- I have a disability and I cannot complete any online form
- I have a disability and I can complete some online forms but I had specific difficulties with this one (please explain what difficulties you had below)
- I have no access to the internet
- I tried using the online system but had technical difficulties (please give details below)
- Other (specify below)

Please give any more details here: