



The City of Liverpool
APPLICATION FOR EMPLOYMENT
EQUAL OPPORTUNITIES
CONFIDENTIAL

Please complete this application form in full using black ink.

For office use only

Date received

Liverpool City Council is an Equal Opportunities Employer. This means that all applicants for jobs in the service of the Authority will receive equal treatment irrespective of their race, gender, marital status, age, disability, religious beliefs, sexual orientation or employment status. The information you provide on this form will assist us in monitoring the effects of our equal opportunities policy in recruitment and selection and will help us to develop and improve.

1. JOB DETAILS – Please provide details of the job for which you are applying

Job title:		Job reference number:	
-------------------	--	------------------------------	--

2. PERSONAL DETAILS

Title:		First name(s):		Last name:	
Date of birth:		Age group :		Please select	

3. GENDER IDENTITY

Gender:	Please select		
Is your gender identity the same as the gender you were assigned at birth?	Please select	Do you live and work full time in the gender role opposite to that assigned at birth?	Please select

The following categories are consistent with the Government's 2001 Census and have been approved by the Commission for Race Equality.

4. RACIAL ORIGIN – Please confirm appropriate category

Asian or Asian British	Please select	Black or Black British	Please select
Chinese or other ethnic group	Please select	Mixed	Please select
White	Please select	If other, please specify:	Prefer not to say <input type="checkbox"/>

5. DISABILITY

Do you consider yourself to be a disabled person:	Please select
--	---------------

6. RELIGION/BELIEF

Please select appropriate category:	Please select	If 'other' please specify:	
--	---------------	-----------------------------------	--

7. SEXUAL ORIENTATION

Please select appropriate category:	Please select
--	---------------

8. SUPPLEMENTARY INFORMATION - Please identify if you would like any support or adjustments to be made to enable you to take part in the selection process for reasons such as religion, disability, medical or maternity.

Please state: (if applicable)	
--	--

Thank you for your application.
Please refer to the guidance notes for full details of the return postal and email addresses.