**Candidate Summary Form**

Please complete this form, and send it with your CV, statement, equal opportunities form and declaration of eligibility to

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| --- |
| POSITION APPLIED FOR: |
| SURNAME | FIRST NAME | INITIAL(S) | TITLE |
| ADDRESS FOR CORRESPONDENCE |
| CONTACT TELEPHONE NUMBER(S) EMAIL ADDRESS |  |

Please tick as appropriate:

* I am currently a carer
* I have been a carer within the last three years

**Equal Opportunities Monitoring From**

*Please tick the appropriate boxes. In order to check the boxes electronically, please right click on the relevant checkbox, click ‘properties’ and change default value to ‘checked’*.

All personal information will be treated in accordance with the Data Protection Act (1998), and the data used for statistical monitoring will be anonymised and published in a way that does not allow individuals to be identified.

Your equal opportunities information will not form part of any selection or promotion process and will not be disclosed to the Nominations Committee.

***Gender:*** Male [ ]  Female [ ]  Prefer not to say [ ]  Prefer to self-describe [ ]  ---------------------

***Are you married or in a civil partnership?***

Yes [ ]  No [ ]  Prefer not to say [ ]

***Age****:*

 16-24 [ ]  25-29 [ ]  30-34 [ ]  35-39 [ ]  40-44 [ ]  45-49 [ ]  50-54 [ ]  55-59 [ ]

 60-64 [ ]  65+ [ ]  Prefer not to say [ ]

#### *What is your ethnicity?*

Ethnic origin is not about nationality, place of birth or citizenship. It is about the group to which you perceive you belong. Please tick the appropriate box:

##### White

English Welsh Scottish Northern Irish Irish British Gypsy or Irish Traveller Prefer not to say

**Any other white background, please write in:**

##### Mixed/multiple ethnic groups

White and Black Caribbean White and Black African White and Asian Prefer not to say Any other mixed background, please write in:

##### Asian/Asian British

Indian Pakistani Bangladeshi Chinese Prefer not to say Any other Asian background, please write in:

##### Black/ African/ Caribbean/ Black British

African Caribbean Prefer not to say

Any other Black/African/Caribbean background, please write in:

##### Other ethnic group

Arab Prefer not to say Any other ethnic group, please write in: ---------------------------

#### *Do you consider yourself to have a disability or health condition as defined by the Equality Act 2010?*

The Equality Act 2010 defines a person with a disability as, “someone who has a physical or mental impairment that has a substantial and long-term adverse effect on his or her ability to carry out normal day-to-day activities.” If YES, please tell us separately about any adaptations which you may require either to carry out the role or to participate in the selection process.

Yes No Prefer not to say

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#### What is your sexual orientation?

Heterosexual Gay woman/lesbian Gay man Bisexual

Prefer not to say

Prefer to self-describe \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

#### What is your religion or belief?

No religion or belief Buddhist Christian Hindu Jewish

Muslim Sikh Prefer not to say

If other religion or belief, please write in: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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## Declaration of Eligibility for Prospective Trustees

I declare that I am not disqualified from acting as a charity trustee and that:

* I do not have an unspent conviction relating to any offence involving deception or dishonesty;
* I am capable of managing and administering my own affairs;
* I am not an undischarged bankrupt nor have I made a composition or arrangement with, or granted a trust deed for, my creditors from which I have not been discharged;
* I am not subject to a disqualification order under the Company Directors Disqualification Act 1986 or to an order made under Section 429(b) of the Insolvency Act 1986;
* I have not been removed from the office of charity trustee or trustee for a charity by an Order made by the Charity Commissioners or the High Court on the grounds of any misconduct or mismanagement nor am I subject to an order under Section7 of the Law Reform (Miscellaneous Provisions) (Scotland) Act 1990, preventing me from being concerned in the management or control of any relevant organisation or body;
* I will at all times ensure the charity’s funds, and charity tax reliefs received by this organisation, are used only for charitable purposes.

I will notify the Chief Executive of Harrow Carers if my circumstances change.

Name in block capitals: ……………………………………………………………….………………………….……….……….

Signed: ……………………………………………………………………………. Date: .………….……………………………….