

Ethnic Origin		(please tick one box only)
White:	British	<input type="checkbox"/>
	Irish	<input type="checkbox"/>
	Any other white background	<input type="checkbox"/> (please write in _____)
Mixed:	White and Black Caribbean	<input type="checkbox"/>
	White and Black African	<input type="checkbox"/>
	White and Asian	<input type="checkbox"/>
	Any other mixed background	<input type="checkbox"/> (please write in _____)
Asian or Asian British:	Indian	<input type="checkbox"/>
	Pakistani	<input type="checkbox"/>
	Bangladeshi	<input type="checkbox"/>
	Any other Asian background	<input type="checkbox"/> (please write in _____)
Black or Black British:	Caribbean	<input type="checkbox"/>
	African	<input type="checkbox"/>
	Any other African background	<input type="checkbox"/> (please write in _____)
Chinese or other ethnic group:	Chinese	<input type="checkbox"/>
	Other	<input type="checkbox"/> (please write in _____)

DEFINITION OF DISABILITY

The Disability Discrimination Act 1995 defines a disability as: "A physical or mental impairment which has a substantial and long-term adverse effect on a person's ability to carry out normal day to day activities". This includes impairments, lasting at least 12 months or likely to recur, to one or more of the following:

- | | |
|---|---|
| • Mobility | • Manual dexterity |
| • Physical co-ordination | • Continence |
| • Ability to carry, lift or otherwise move everyday objects | • Perception of risk or danger |
| • Memory or ability to concentrate, learn or understand | • Speech, hearing or sight (not where sight is corrected by wearing spectacles or contact lenses) |

The term impairment includes progressive conditions. Some examples of impairments or long term conditions which could be considered as a disability under this definition are set out below. It is intended as a guide and is not an exhaustive list:

- | | | |
|-------------------------------|---------------------|---------------------------------------|
| Heart/circulation complaints | Epilepsy | Crohn's Disease |
| Limited physical mobility | Arthritis | Severe allergies |
| Long term back/neck problems | Clinical depression | Impairment to hearing speech or sight |
| Upper limb disorders (eg RSI) | Diabetes | Schizophrenia |
| Multiple Sclerosis | Muscular Dystrophy | Manic depressive illness |

Disability

Do you consider yourself to have a disability in accordance with the Disability Discrimination Act 1995?

Yes No

- Section 4 - Education and Training

Secondary schools, colleges, university, etc attended			
Name & address	from	to	Examinations passed
<p>(continue on final sheet if necessary)</p>			

Other relevant training courses (within and outside work)			
Course subject or title	from	to	Source or provider
<p>(continue on final sheet if necessary)</p>			

Please give details of continuous skill/professional development. Please include details of additional qualifications gained and/or membership of professional associations

(continue on final sheet if necessary)

Are you able to travel to Saffron Walden
And other locations within the District for
the purpose of attending council or committee
meetings?

Yes No

- **Section 5 - Supporting information and comments**

Please provide any other information in support of your application, ensuring that you address all the requirements of the Person Specification in the order given. Give evidence of relevant examples from work or in a voluntary capacity.

Continue on a separate sheet if necessary

• **Section 6 – Criminal Convictions and Relationships**

Do you have any criminal convictions which are deemed unspent under the Rehabilitation of Offenders Act 1974? Yes No

If yes, please give details :- (*offence, date of conviction, outcome*)

Previous surnames/other names known by:

Are you related to or a close friend of a Councillor or employee of Uttlesford District Council or any Parish or Town Council in the District?

Yes No

If yes, please specify the relationship :-

If you try to influence councillors or officers about this application we will disqualify you.

Are you a member or officer of any local authority?

Yes No

Have you been a Councillor or employee of Uttlesford District Council or of any Parish or Town Council in the District within the last 5 years?

Yes No

If yes, please specify when :-

If you have been a councillor or officer of Uttlesford District Council within 5 years before the proposed date of appointment to the Standards Committee you will not be eligible for appointment.

• **Section 7 – References** Referees may be your current and/or previous employers and/or personal referees able to comment upon your suitability for the role.

Please give the names and addresses of two referees. We usually take up references on all shortlisted candidates before their interview.

Name:
Relationship:
Address:

Name:
Relationship:
Address:

Tel: Fax:
e-mail:

Tel: Fax:
e-mail:

Data Protection Act 1998. *The Council is registered under the Data Protection Act 1998. Some or all of the above data may be held on a database or relevant filing system. Any data held will be fairly and lawfully managed and processed for relevant personnel purposes and we will ensure the details are adequate, relevant, accurate, confidential and secure. Any processing will comply with the regulations and afford you your rights under legislation.*

By completing and signing this document we note you are giving permission for the data to be so used by Uttlesford District Council.

Declaration

I understand that Uttlesford District Council has a duty to protect the public funds it administers and may use the information I have given on this form to prevent and detect fraud. The Council may also share this information with other organisations that administer public funds, for these purposes. I confirm that to the best of my knowledge the information I have given above and in any document(s) I have sent with my application is correct.

Signature Date

Please use this page to continue

Section No

Comment

