

## Jodrell Bank Centre for Astrophysics Work Experience Application Form

If possible, please use the online version of this form at <http://tinyurl.com/jbca2015>

<b>Name:</b>		<b>DOB:</b>	
<b>Address:</b>			
<b>Postcode:</b>		<b>Email:</b>	
<b>School/college:</b>			
<b>AS-Level subjects:</b>			
<b>Why do you want to attend the work experience programme? (max ~ 300 words)</b>			
<b>I confirm that I have parent/guardian and school permission to attend this programme, and that if selected I will commit to engaging fully with the activities involved. [Select the box or type your name on the next line:]</b>			<input type="checkbox"/>

## Equal opportunities monitoring form

We try to monitor the applications we receive to make sure our process is as fair as possible. This information will be treated as confidential. Selecting 'prefer not to say' on any of the boxes below is fine and won't affect your application. If you have this form in a file format that doesn't let you select the box, delete the correct box and type 'x'.

<b>Gender</b>			
Female <input type="checkbox"/>	Male <input type="checkbox"/>	Other <input type="checkbox"/>	Prefer not to say <input type="checkbox"/>
<b>Ethnic Origin</b>			
Which one of the following groups do you feel most closely describes your ethnic origin?			
White British <input type="checkbox"/>	Other Mixed Background <input type="checkbox"/>	Black/Black British - African <input type="checkbox"/>	
White Irish <input type="checkbox"/>	Asian/Asian British - Indian <input type="checkbox"/>	Other Black Background <input type="checkbox"/>	
Other White Background <input type="checkbox"/>	Asian/Asian British - Pakistani <input type="checkbox"/>	Chinese <input type="checkbox"/>	
Mixed – White & Black-Caribbean <input type="checkbox"/>	Asian/Asian British - Bangladeshi <input type="checkbox"/>	Other Ethnic Background <input type="checkbox"/>	
Mixed – White & Black-African <input type="checkbox"/>	Other Asian Background <input type="checkbox"/>	I don't know <input type="checkbox"/>	
Mixed – White & Asian <input type="checkbox"/>	Black/Black British - Caribbean <input type="checkbox"/>	Prefer not to say <input type="checkbox"/>	
<b>Disability</b>			
Do you consider yourself to be disabled / have a disability, or do you have any long-term health related condition that impacts upon your ability to carry out normal day-to-day activities? <i>Definition: a physical or mental impairment which has a substantial and long-term adverse effect on your ability to carry out normal day-to-day activities</i>			
Yes <input type="checkbox"/>	No <input type="checkbox"/>	Prefer not to say <input type="checkbox"/>	
<b>Local Authority Care</b>			
Do you have experience of local authority care?			
Yes <input type="checkbox"/>	No <input type="checkbox"/>	Prefer not to say <input type="checkbox"/>	
<b>Family education history</b>			
What is the highest academic qualification held by a parent, guardian or carer?			
I don't know <input type="checkbox"/>	No qualification <input type="checkbox"/>	Prefer not to say <input type="checkbox"/>	
GCSEs/O-Levels/equivalent <input type="checkbox"/>	A-Levels/equivalent <input type="checkbox"/>		
University degree or equivalent <input type="checkbox"/>	Postgraduate degree (eg Masters, PhD) <input type="checkbox"/>		
Other (please specify:)			

### Data Protection

The information you have provided about yourself will be treated as confidential. Your details will not be used for commercial purposes. For example, we will never pass information on to anyone who wants to sell you something. The information you have provided will only be used for selection and research purposes, and you will not be contacted.

Please return this form to [emma.nichols@manchester.ac.uk](mailto:emma.nichols@manchester.ac.uk). Printing it out and scanning it to send by email is fine – or if you want return it by post, the address is: Emma Nichols, Schuster Building, University of Manchester, Oxford Road, Manchester, M13 9PL. All applications must be received by **10<sup>th</sup> April 2015**.