



Form 2 (of 2)

Application Form for Membership of the Joint Committee on Vaccination and Immunisation PUBLIC HEALTH SPECIALIST

Monitoring Information

Name of Candidate:

All Government Departments aim to provide fair and equal access to public appointments, and to ensure that all sectors of society are properly represented. The questions set out below help us to monitor the effectiveness of our strategy, by gaining a picture of all those on those applying for and obtaining appointments. The Department is also required to provide annual monitoring information to the Commissioner for Public Appointments on the age, ethnicity and gender of all people appointed to public appointments, as well as details on whether they are politically active or have any disability. ALL applicants should therefore complete the questions listed below. Answers please in black ink to help with photocopying.

Part 1: Gender

Male Female

Part 2: Ethnic Origin

White Black African Black Caribbean Chinese

Bangladeshi Indian Pakistani

Other Please specify

Information on the composition of Department of Health public bodies by gender is published in the Department of Health's "Public Appointments Annual Report" and in the Cabinet Office's publication "Public Bodies". The Department may also be required to reveal information on ethnic origin and disability in response to Parliamentary Questions and other public enquiries and the Data Protection Act requires that those providing this information must be informed, and their consent given. Do you consent therefore to this information being made publicly available?

Yes No

Part 3: Political Activity

The questions below are asked for two reasons:

- involvement in political activities enables individuals to gain and to demonstrate skills and experience they may not otherwise have obtained; and
- it enables the monitoring of political activity of candidates for a public appointment in so far as they are already in the public domain. Neither activity or affiliation is a criterion for appointment (except where statute dictates specific representation).

Please indicate which of the following activities you have undertaken during the past five years by ticking the appropriate box and by providing details of your involvement. Name the party or body for which you have been active. If you have been or are an independent or have sought or obtained office as a representative of a particular interest group, you should state this. You should tick all relevant categories.

- | | |
|---|--------------------------|
| Obtained office as a Local Councillor, MP, MEP etc. | <input type="checkbox"/> |
| Stood as a candidate for one of the above office | <input type="checkbox"/> |
| Spoken on behalf of a party or candidate | <input type="checkbox"/> |
| Acted as a political agent | <input type="checkbox"/> |
| Held office such as Chair, Treasurer, or Secretary of a local branch of a party | <input type="checkbox"/> |
| Canvassed on behalf of a party or helped at elections | <input type="checkbox"/> |
| Undertaken any other political activity which you consider relevant | <input type="checkbox"/> |

Details of involvement:

- I am not politically active and none of the above activities apply

Name of Party for which activity undertaken?

- | | | | |
|--------------|--------------------------|-------------------|--|
| Conservative | <input type="checkbox"/> | Liberal Democrats | <input type="checkbox"/> |
| Labour | <input type="checkbox"/> | Independent | <input type="checkbox"/> |
| Other | <input type="checkbox"/> | Please specify | <div style="border: 1px solid black; width: 480px; height: 30px;"></div> |

The activities listed above may provide an opportunity to demonstrate skills and experience which might be useful in the appointment for which you are applying and may give you the opportunity to demonstrate commitment for the appointment. You may be asked about them. If you are successful, the information will be used in the announcement of your new post.

Part 4: Disability

Are you disabled? Yes No

The Department is committed to recruiting disabled people.

Part 5: Declaration

I confirm that the information given in this form is complete and correct.

Signature

Date

This form should be returned with Form 1 to:

*Richard Griffiths
Room 601A
Skipton House
80 London Road
LONDON SE1 6LH*

Please also enclose an up to date CV when returning completed Forms 1 & 2