**Cumbria District/Circuit/Church EDI Officer, Solidarity Group Champion**

**or Group Member**

**Application for all Protected Areas of Human Diversity**

 **Age/Ageism, Gender, Transgender, Racial Justice/Ethnicity,**

**Sexuality/ LGBTQ+,** [**Socio/ Economic Justice**](https://www.methodist.org.uk/media/23176/edi-toolkit-3-0921.pdf)**,**

**Living with/Holding the identity of Disability or Impairment**

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| **1. Please indicate if there is a particular Solidarity circle that you are drawn to** |
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| Solidarity Circle for Living with/ Holding the identity of Disability/Impairment |  |
| Solidarity Circle for Sexuality/LGBT+  |  |
| Solidarity Circle for Racial Justice/Ethnicity |  |
| Solidarity Circle for Gender |  |
| Solidarity Circle for Transgender |  |
| It is possible to offer to serve on more than one Solidarity Circle. To support your application please complete the relevant section(s) on question number 3.  |
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| **2. Personal Details** |
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| Title: |  |
| Surname: |  |
| First name(s): |  |
| Pronouns (optional) |  |
| Address:  |  |
|  |
|  |
| Post Code: |  |
| Telephone number: | Home: |  |
| Daytime:  |  |
| Mobile:  |  |
| E-mail address:  |  |
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| **3. Using the role description as a guide, please tell us why you think that you are suitable to be a member of a Solidarity Circle. You can include relevant life experience and skills from any area of life.It is possible to offer to serve on more than one Solidarity Circle, please complete the relevant box(s) below using no more than 500 words.** **If you would prefer, you can answer this question by submitting an audio or video recording with the expression of interest form. These should be in MP3 or MP4 format and no more than five minutes long.**  |
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| 3a. I think that I am suitable to be a member of the Solidarity Circle for Living with/Holding the Identity of Disability/Impairment because… |
| (No More than 500 words) |
| 3b. I think that I am suitable to be a member of the Solidarity Circle for Sexuality/LGBT+ because… |
| (No more than 500 words) |
| 3c. I think that I am suitable to be a member of the Solidarity Circle for Racial Justice/Ethnicity because… |
| (No more than 500 words) |
| 3d. I think that I am suitable to be a member of the Solidarity Circle for Gender because…. |
| (No more than 500 words) |
| 3e. I think that I am suitable to be a member of the Solidarity Circle for Transender because…. |
| (No more than 500 words) |
| 3f. I think that I am suitable to be a member of the Solidarity Circle for Socio/Economic Justicebecause…….. |
| (No more than 500 words) |

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| **4. The commitment is for a maximum of three years. Please indicate below your preferred time period.**  |
| **One year** |  |
| **Two years** |  |
| **Three years** |  |
| **Any of the above**  |  |

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| **5. To enable participation across the District and Connexion, Solidarity Circle meetings take place on Zoom on evenings or weekends. In person contact can be arranged where needed. The frequency is likely to be monthly or bi-monthly, but frequency will be decided by the circle members.** **Please indicate below your USUAL availability** |
| Monday evening |  |
| Tuesday evening |  |
| Wednesday evening |  |
| Thursday evening |  |
| Saturday daytime |  |
| Sunday afternoon |  |
| Sunday evening |   |
| Any further comments or questions: |

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| **6. Please let us know if you have any support needs relevant to completing any of the roles.** |
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| **7. How did you first find out about this work** |
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| **8. References****Please give details below of two people (not relatives) who know you well and would be able to give a reference, for example a colleague, a church contact or a minister.** References will be taken up only in the event of you being offered a role.  |
| **1.**  |
| **Name**: |  |
| **Email**: |  |
| **Telephone**: |  |
| **Address and Postcode** |  |
| **Relationship: (e.g. colleague, church contact, minister)** |  |
| **2.**  |
| **Name**: |  |
| **Email**: |  |
| **Telephone**: |  |
| **Address and Postcode** |  |
| **Relationship: (e.g. colleague, church contact, minister)** |  |
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| **9. Eligibility** To apply for this work you must in fellowship with a church in our Ecumenical Partnership. Please include below the name of the church you are connected with and the circuit/district - if known.  |
| Name of church:  |  |
| Circuit /Ecumenical Partnership |  |
| District /Diocese/Area |  |

 **10. Declaration**

**I declare that the information contained in this expression of interest form is true and accurate.**

Signed:

**11. Equality, Diversity and Inclusion Monitoring Form**

In order to help to appoint a diverse range of people into each Solidarity area, please complete the Equality, Diversity and Inclusion Monitoring Form on the next pages

**EQUALITY, DIVERSITY AND INCLUSION MONITORING FORM**

The data gained from this form will be used to assist the identifying and address any trends or patterns which may have the potential to lead to disadvantage or discrimination. This data will also be used to establish and share best practise and to celebrate the rich diversity of people.

All of the following questions are optional. If you prefer not to answer a particular question, please leave that question blank, or tick the ‘I prefer not to answer this question’ option where available.

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| **Please describe your gender:** [ ]  **Male** [ ]  **Female** [ ]  **Non-binary** [ ]  I **prefer to describe my gender in another way. *Please state your preferred self-description of your gender here: …………………………………………***[ ]  **I prefer not to answer this question** |

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| **Year of birth**: |  |

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| **Marital or Registered Civil Partnership status:** | **Please describe your legal or registered civil partnership status:**[ ]  **Never married and never registered a civil partnership**[ ]  **Married**[ ]  **In registered civil partnership**[ ]  **Separated but still legally married**[ ]  **Separated but still legally in a civil partnership** [ ]  **Divorced**[ ]  **Formally in a civil partnership which is now legally dissolved**[ ]  **Widowed**[ ]  **Surviving partner from a registered civil partnership**[ ]  **I prefer not to answer this question** |

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| **Disability and impairment:** | The Equality Act 2010 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’.An effect is long-term if it has lasted, or is likely to last, over 12 months**Do you consider that you have a disability under the Equality Act definition?**[ ]  Yes[ ]  No |
|  | If you have answered ‘Yes’, please select the categories from the list below that best describes your disability/disabilities/impairments: |
|  | [ ]  **Physical impairment** (such as: deaf, partially deaf or hard of hearing; blind or fractional/partial sight). [ ]  **Mental health**  [ ]  **Learning disability and/or difficulty** [ ]  **Long-term medical condition or illness** (including anything for which you take a regular prescribed medication or need regular medical treatment; e.g. diabetes, cancer, epilepsy, asthma, etc.) [ ]  **Do not wish to declare** [ ]  **Another disability.** *Please specify:…………………………………………………*….. |

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| **Nationality** | How would you describe your national identity?[ ]  English [ ]  Welsh [ ]  Scottish [ ]  Northern Irish [ ]  British [ ]  Please tick this box if you would prefer to state an alternative national identity not stated above, and optionally describe your national identity here: ……………………………………………………………………………………………………. |
| **Ethnicity:** | Individuals should determine which of the following categories they most closely associate themselves with, having regard to their ethnic or cultural background.Ethnicity categories are based on the Office of National Statistics (ONS) recommendations 2021  |
| I would describe myself as: |
| **Asian/Asian British** | **Other Ethnic Group** | **Black/Black British/****Caribbean or African** | **Mixed/Multiple Ethnic Groups** | **White/White British** |
| [ ]  Bangladeshi  | [ ]  Arab | [ ]  African  | [ ]  White & Asian | [ ]  White English, Welsh, Scottish, Northern Irish orBritish |
| [ ]  Indian  | [ ]  Caribbean | [ ]  White & Black African   | [ ]  Irish |
| [ ]  Pakistani     | [ ]  White & Black Caribbean  | [ ]  Gypsy or Irish Traveller |
| [ ]  Chinese | [ ]  Roma |
| [ ]  Any other Asian background, please describe:…………………………… | [ ]  Any other ethnic group; please describe:……………………… | [ ]  Any other Black/African/Caribbean background; please describe:…………………………… | [ ]  Any other Mixed/ Multiple ethnic background; please describe:…………………………… | [ ]  Any other White background; please describe:…………………………… |
| [ ]  Please tick this box if the category in which you would closely associate yourself is not given above, and optionally also tell us how you would describe yourself: ………………………………………………………………. |

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| **Which of the following best describes your sexual orientation?**[ ]  Bisexual [ ]  Gay or Lesbian [ ]  Heterosexual/Straight [ ]  Another sexual orientation. *If you have selected this option, you can choose to self-describe your sexual orientation here:* ……………………………………………….[ ]  I prefer not to answer this question  |
| Is the gender you identify with the same as your sex registered at birth?[ ]  **Yes** [ ]  **No** [ ]  **Prefer Not to Say**  |

**Please email completed form to:**

**Revd Tim Cooke - tim.cooke@methodist.org.uk**

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