**GUARANTEED INTERVIEW SCHEME**

If you wish to apply under the Guaranteed Interview Scheme, please complete the following form below and return it with your application.

If you would like to have a chat with us about reasonable adjustments, please contact brunette.kasongo@miles-advisory.com

**SECTION1 Personal Details**

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| **SECTION 1 PERSONAL DETAILS** |
| Role you are applying for:  |
| Title: Surname(s):Forename(s): |
| Email address:  |

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| **SECTION 2 DISABILITY CONFIDENT SCHEME.**  |
| The ORR is committed to providing equality of opportunity for all candidates during the selection process, so that appointments are selected from the widest pool of talent available. We are signed up to the disability confidence scheme and as part of that commitment is that we guarantee an interview to any candidate who:* has disclosed a disability as defined under the Equality Act 2010 (see definition below); and
* meets the essential criteria for the post(s) in question, as set out in the role advertisement.

The Equality Act 2010 defines a person as disabled if they have a physical or mental impairment and the impairment has a substantial and long-term adverse effect on their ability to carry out normal day to day activities.If you wish to apply under the disability confident scheme, please complete the Guaranteed Interview Scheme form and return it with your application.**All applications will be acknowledged by email after the closing date.*** For further information on the definition of disability under the Equality Act 2020. Please read <https://www.gov.uk/definition-of-disability-under-equality-act-2010>
* For more information on recording whether you have a disability. Please read.

<https://publicappointments.cabinetoffice.gov.uk/recording-whether-or-not-you-have-a-disability/> |
| I have a disability and would like to apply under the Disability Confident Scheme. [ ]  Yes [ ]  No [ ]  Prefer not to say. |
| Do you require any reasonable adjustments for this application? *e.g.: alternative format to fill in the application, extra time if presentation is requested as part of the interview, braille notes etc.* [ ]  Yes [ ]  No [ ]  Prefer not to say. If yes, you may choose to provide detail below:  |

|  |  |  |
| --- | --- | --- |
|   | **Date:**  |   |

**Signature:**

All applications will be acknowledged by email after the closing date.