



3. How many days sickness absence have you had in the past 2 years?  
\_\_\_\_\_ days
4. Was this only one episode of absence? Yes / No
5. If "No", how many different episodes were there within this time?  
\_\_\_\_\_ episodes

### **Disability**

The Disability Discrimination Act (1995) defines a disabled person as "a person who has (or has had in the past) a physical or mental impairment which has a substantial long term adverse effect on their ability to carry out normal day-to-day activities".

6. Under this definition do you consider yourself disabled? Yes / No

### **Reasonable Adjustments**


7. Whether you consider yourself disabled or not, do you need any special aids / adjustments to assist you at work? Yes / No

### **Declaration**

I declare this information to be a true statement to the best of my knowledge and belief and that I consider I am medically able to undertake this work:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Health Declaration Form – Please Return Prior To Your Interview**

 **The Data Protection Act 1998** : Your personal data will be processed for recruitment purposes. Information will be stored electronically as part of the recruitment process. Statistical reports will only be produced in anonymous form and your details will not be passed onto any third parties.