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| Equal Opportunities Monitoring Form |

Our company recognises and actively promotes the benefits of a diverse workforce and is committed to treating all employees with dignity and respect.

In accordance with our Equal Opportunities Policy, our company will provide equality of opportunity to all employees and job applicants and will not discriminate either directly or indirectly on the grounds of race, sex, gender identity, marital status, disability, sexual orientation, religion/belief or age.

We have only asked for your name so that monitoring can take place at short listing and appointment stages. The monitoring form does not form part of your application and will therefore be detached from it on receipt, stored separately and will not be available to the selection panel. You can send it separately if you wish.

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| 1. Role: Please tick against one of the following | | | |
| What type of role are you applying for? | Trustee | Staff | Panel Member |
|  | Volunteer | Other | ­­­­­­­­­­­­­­­­ |

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| 1. Where did you see the role advertised? Please tick against one of the following | | | |
| Newsletter | LinkedIn job ad | Recruit3 | Other |
| Social Media | CharityJobs | Website | ­­­­­­­­­­­­­­­­Please state |

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| 1. Personal Details: Please complete all sections |

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| --- | --- | --- | --- | --- | --- | --- |
| Age | 16-24 | 25-29 | 30-34 | | 35-39 | 40-44 |
|  | 45-49 | 50-54 | 55-59 | | 60-64 | 65+ |
|  | Prefer not to say | | |  | | |

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| --- | --- | --- | --- | --- |
| What best describes your gender? | Male | Female | | Prefer not to say |
| Prefer to self-describe | |  | |

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| --- | --- | --- | --- |
| Is your gender identity the same sex you were assigned at birth? | Yes | No | Prefer not to say |

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| --- | --- | --- | --- |
| Are you Married or in a Civil Partnership? | Yes | No | Prefer not to say |

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| 1. Sexual Orientation: Please tick against one of the following |

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| Bisexual |  | | Gay Man |  |
| Gay Woman / Lesbian |  | | Heterosexual / Straight |  |
| Prefer to self-describe |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Prefer not to say |  |

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| 1. Religion or belief: Please tick against one of the following |

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| --- | --- | --- | --- | --- | --- |
| No religion |  | Buddhist |  | Christian |  |
| Hindu |  | Jewish |  | Muslim |  |
| Sikh |  | Other ­­­­­ |  | Prefer not to say |  |

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| 1. Ethnic origin: Please tick against one of the following |

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| Asian/  Asian British | Bangladeshi |  |
| Chinese |  |
| Indian |  |
| Pakistani |  |
| Other Asian |  |
| Black/African/Caribbean/  Black British | African |  |
| Caribbean |  |
| Other Black |  |
| Mixed/  Multiple Ethnic Groups | White & Asian |  |
| White & Black African |  |
| White & Black Caribbean |  |
| Other Mixed |  |
| Other Ethnic Group | Arab |  |
| Any Other Ethnic Group |  |
| White | English/Welsh/Scottish/Northern Irish/British |  |
| Gypsy or Irish Traveller |  |
| Irish |  |
| Other White |  |
| Prefer not to say |  |  |

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| 1. Disability: Please tick against one of the following |

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| Do you consider yourself to have a disability?  You’re disabled under the [Equality Act 2010](http://www.legislation.gov.uk/ukpga/2010/15/section/6) if you have a physical or mental impairment that has a ‘substantial’ and ‘long-term’ negative effect on your ability to do normal daily activities. (Conditions covered may include, for example, severe depression, dyslexia, diabetes, epilepsy and arthritis.)  Yes  No  Prefer not to say  PLEASE NOTE: This information is provided for monitoring purposes only – if you need reasonable adjustments, you should arrange these separately. |
| 1. Caring: Do you have caring responsibilities? |

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| If yes, please tick all that apply: | |
| No caring responsibilities  Primary carer of a child/children (under 18)  Primary carer of disabled child/children  Primary carer of disabled adult (18 and over)  Primary carer of older person  Secondary carer (another person who assists the primary carer)  Prefer not to say |  |

Thank you for completing this form and enabling us to monitor our Equality and Inclusion Policy.