**Equal** **and Diversity Monitoring** **Form** ****

Please fill in this form and return it with your application form. If you would not like to answer a specific question, you can tick the relevant box. This data is solely used by ILA/SDS Forth Valley in reviewing and reporting of our equal opportunities policy. It is in compliance with General Data Protection Regulation

The information provided will be treated with the strictest confidence and held securely.

**Introduction**.

Independent Living Association / Self Directed Support Forth Valley is committed in the promotion of equal opportunities. We aim to treat people fairly and eliminate discrimination in our employment practices under the Equality Act 2010. All job applicants will be treated fairly, with respect and free from bias. The charity needs your assistance and co-operation to enable us to do this, but filling in this form is voluntary.

**The information on this form**

This form is isolated from your application form. The information is placed onto a confidential monitoring database. Please be assured that information on this form is treated anonymously and confidentially. It helps build an accurate picture of our workforce in encouraging equality and diversity.

Thank you

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| **Gender**  Man 🗆 Woman 🗆 Intersex 🗆 Non-binary 🗆    Prefer not to say 🗆 If you prefer to use your own term, please    Specify here ……………………………………………... |
| **Are you married or in a civil partnership?**  Yes 🗆 No 🗆 Prefer not to say 🗆 |
| **Age** 16-24 🗆 25-29 🗆 30-34 🗆 35-39🗆 40-44 🗆 45-49 🗆    50-54 🗆55-59 🗆 60-64 🗆 65 + 🗆 Prefer not to say 🗆 |
| **What is your ethnicity?**  Ethnic origin is not about nationality, place of birth or citizenship. It is about the group to which you perceive you belong. Please X the appropriate box  ***White***  En English 🗆 Welsh 🗆 Scottish 🗆 Northern Irish 🗆 Irish 🗆  British 🗆 Gypsy or Irish Traveller 🗆 Prefer not to say 🗆  Any other white background, please write in;  **Mixed/ multiple ethnic groups**  White and Black Caribbean 🗆 White and Black African 🗆  White and Asian 🗆 prefer not to say 🗆  Any other mixed background please write in |
| **Asian / Asian British**  **Indian** 🗆 Pakistani 🗆 Bangladeshi 🗆 Chinese 🗆 Prefer not to say 🗆  **Any other Asian background, please write in** |
| **Black/ African / Caribbean/ Black British**  African 🗆 Caribbean 🗆 Prefer not to say 🗆  Any other Black/African/Caribbean background, please write in. |
| **Other Ethnic Group**  Arab 🗆 prefer not to say 🗆 Any other ethnic group, please write in |
| **Do you consider yourself to be disabled or have a health condition?**  Yes 🗆 No 🗆 Prefer not to say 🗆  What is the effect or impact of your impairment or health condition on your ability to give your best at work? Please write here  The information on this form is for monitoring purposes only. If you  believe you need a reasonable adjustment, then please discuss this  with the manager |
| **What is your sexual orientation?**  Heterosexual🗆 Gay woman/lesbian 🗆 Gay man 🗆 Bisexual 🗆  Other 🗆  If you use your own term, please specify here  If you prefer not to say, please indicate here 🗆 |
| **What is your religion or belief?**  No religion or belief 🗆 Buddhist 🗆 Christian 🗆 Hindu 🗆 Jewish 🗆  Muslim 🗆 Sikh 🗆 Humanist 🗆 Prefer not to say 🗆  If of another religion or belief, please write in here |
| **What is your current working pattern, if any?**  Full-time 🗆 Part-time 🗆 Prefer not to say 🗆 |
| **What is your current flexible working arrangement?**  None 🗆 Flexi-time 🗆 Staggered hours 🗆 Term time hours 🗆  Annualised hours 🗆 Job-share 🗆 Flexi shifts 🗆 Compressed hours 🗆  Homeworking 🗆 prefer not to say 🗆 If other please write below |
| **Do you have caring responsibilities? If yes, please tick all that apply.**  None 🗆 Primary Carer of a child/children (under 18) 🗆  Primary carer of disabled child/children 🗆  Primary carer of disabled adult (18 or over) 🗆  Primary carer of older person 🗆  Secondary carer (another person carries out the main caring role) 🗆  Prefer not to say 🗆 |

**Thank you.**

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