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| INTERNAL: *EQUAL OPPORTUNITIES MONITORING FORM - CONFIDENTIAL* |
| In order to check the effectiveness of Renfrewshire Carers Centre (RCC) Equality and Diversity Policy, RCC monitors a range of areas where people may experience discrimination. RCC would be pleased if you would complete the form below. The information you give will not be available to people involved in the selection process and will be used for monitoring purposes only. All information will be treated in strict confidence. |

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| **1. POST DETAILS** |
|  POST APPLIED FOR :-  |

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| **2. GENDER IDENTITY** |
| How would you describe your gender?[ ]  Female [ ]  Male [ ]  Prefer not to answer |
| Have you ever identified as a transgender person or trans person?(*for the purpose of this question, ‘transgender’ is defined as an individual who lives, or wants to live, full-time in the gender opposite to that which they were assigned at birth)*[ ]  Yes [ ]  No [ ]  Prefer not to answer |

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| **3. MARITAL STATUS** |
| What is your legal marital status?[ ]  Single [ ]  Married/Civil Partnership [ ]  Living with partner [ ]  Divorced/Separated[ ]  Widowed [ ]  Prefer not to answer |

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| **4. AGE** |
| What age group do you belong to? [ ]  16-18 [ ]  19-25 [ ]  26-35 [ ]  36-45 [ ]  46-55 [ ]  Over 55 [ ]  Prefer not to answer  |

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| **5. CARING RESPONSIBILITIES** |
| Do you have caring responsibilities? *(Please tick all that apply)*[ ]  Yes (children under 18) [ ]  Yes (other) [ ]  No [ ]  Prefer not to answer   |

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| **6. RELIGION OR BELIEF** |
| What is your religion or belief?[ ]  Buddhist [ ]  Church of Scotland [ ]  Hindu [ ]  Humanist [ ]  Jewish[ ]  Muslim [ ]  None [ ]  Other Christian [ ]  Sikh [ ]  Pagan[ ]  Roman Catholic [ ]  Prefer not to answer [ ]  Other religion or belief, please specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **7. SEXUAL ORIENTATION** |
| What is your sexual orientation?[ ]  Bisexual [ ]  Gay [ ]  Heterosexual/Straight [ ]  Lesbian [ ]  Prefer not to answer |

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| **8. NATIONAL IDENTITY** |
| What is your national identity?[ ]  Scottish [ ]  English [ ]  Welsh [ ]  Northern Irish [ ]  British [ ]  Prefer not to answer Other, please specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **9. ETHNIC GROUP** |
| What is your ethnic group?For this question, you should choose one section from A to G to indicate your ethnic group. Choose H if you prefer to not answer this question. |
| A. White[ ]  Scottish[ ]  Other British[ ]  Irish [ ]  Gypsy/Traveller[ ]  Eastern European (for example Polish)[ ]  Other white ethnic group, please specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_B. Mixed or Multiple Ethnic Groups[ ]  Any mixed or multiple ethnic groups, please specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_C. Asian, Asian Scottish or Asian British[ ]  Pakistani, Pakistani Scottish or Pakistani British [ ]  Indian, Indian Scottish or Indian British [ ]  Bangladeshi, Bangladeshi Scottish or  Bangladeshi British[ ]  Chinese, Chinese Scottish or Chinese British[ ]  Other, please specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  | D. African[ ]  African, African Scottish or African British[ ]  Other, please specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**E. Caribbean or Black**[ ]  Caribbean, Caribbean Scottish or Caribbean British[ ]  Black, Black Scottish or Black British[ ]  Other, please specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ F. Arab [ ]  Arab, Arab Scottish, Arab British[ ]  Other, please specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_G. Other **[ ]** Other, please specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_H. Prefer not to answer [ ]  Prefer not to answer |
| **10. DISABILITY** |
| Under the terms of the Equality Act 2010, a disability is defined 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 tasks. Do you consider that you have a disability?  [ ]  Yes [ ]  No [ ]  Prefer not to answer |

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Thank you for completing this form