

**Equal Opportunities Monitoring Form**

RASASH is committed to promoting equality and diversity within our organisation. You are not required to answer any or all of the questions, but it would assist us in monitoring the effectiveness of our recruitment and selection policy.

The information you provide is for monitoring purposes only and will not be used as part of the recruitment and selection process. This section will be removed before the shortlisting process. The information will be treated in the strictest confidence.

Please return this form separately by email to: [admin@rasash.org.uk](mailto:admin@rasash.org.uk) marked **Private & Confidential.** If returning by post, please return in a sealed envelope marked **Private & Confidential** to: Recruitment, 38/40 Waterloo Place, Inverness, IV1 1NB.

**Age**

**16 – 24**

**25 – 40**

**41 – 55**

**56 – 65**

**66 +**

**Prefer not to say**

**Ethnicity**

1. **African, Caribbean, or Black**

African, African Scottish or African British

Caribbean, Caribbean Scottish or Caribbean British

Black, Black Scottish or Black British

Any other Black background

Other (please specify): Click or tap here to enter text.

1. **Asian, Asian Scottish, or Asian British**

Indian, Indian Scottish or Indian British

Pakistani, Pakistani Scottish or Pakistani British

Bangladeshi, Bangladeshi Scottish or Bangladeshi British

Chinese, Chinese Scottish or Chinese British

Any other Asian background

Other (please specify): Click or tap here to enter text.

1. **White**

British

English

Irish

Scottish

Welsh

Polish

Northern Irish

Gypsy / Traveller

Other (please specify): Click or tap here to enter text.

1. **Other ethnic group**

Arab, Arab Scottish, Arab British

Any other mixed or multiple ethnic groups

Other (please specify): Click or tap here to enter text.

1. **Prefer not to say**

**Religion or religious belief**

Christian

Buddhist

Hindu

Jewish

Muslim

Sikh

No religion

Other (please specify): Click or tap here to enter text.

**Prefer not to say:**

**Sexual orientation monitoring**

Heterosexual

Lesbian

Gay

Bisexual

Other (please specify): Click or tap here to enter text.

**Prefer not to say:**

**Disability monitoring**

Do you consider yourself to have a disability or long-term health condition?

Yes

No

If yes, please give details: Click or tap here to enter text.

**Prefer not to say:**

**Gender monitoring**

Please describe your gender:

Female (including male to female trans women)

Male (include female to male trans men)

Non-binary

Other (please specify): Click or tap here to enter text.

**Prefer not to say**

Have you ever identified as a trans gender or trans person?

Yes

No

**Prefer not to say**