A picture containing graphics, font, clipart, graphic design

Description automatically generatedHome-Start West Lothian wants to meet the aims and commitments set out in its Equality, Fairness and Diversity Policy. This includes not discriminating under the Equality Act 2010, and building an accurate picture of the make-up of the workforce in encouraging equality and diversity. We would appreciate your help and co-operation to enable us to do this, but filling in this form is voluntary.

This information, which will be used solely for monitoring purposes, will be treated as confidential.

The information on these forms will be transferred to a summary sheet for the purpose of retaining overall statistical information. The completed individual forms will then be destroyed. The responses to these questions will not affect the success or otherwise of a job application in any way.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| What is your Gender? | | | | | | | | | | | | | | |
| Male: | | | Female: | | | | | Non-Binary: | | | | | | Prefer not to say: |
| If you describe your gender with another term, please provide it here: | | | | | |  | | | | | | | | |
| **Do you consider yourself a trans person?** | | | | | | Yes: | | | No: | | | | Prefer not to say: | |
| Trans is an umbrella term to describe people whose gender is not the same as the sex they were assigned at birth. | | | | | | | | | | | | | | |
| **Are you married or in a civil partnership?** | | | | | | Yes: | | | | | No: | | | |
| **Do you consider yourself to be disabled?** (By disability, we mean do you have a physical or mental impairment that has a ‘substantial’ and ‘long-term’ negative effect on your ability do normal daily activities). | | | | | | Yes: | | | No: | | | | Prefer not to say: | |
| Which age group do you belong to? | | | | | | | | | | | | | | |
| Up to 15: | 16 – 24: | | | 25 – 44: | | 45 – 64: | | | 65+: | | | | Prefer not to say: | |
| **What is your ethnicity?**  Please choose one from section A – E, and then tick which best describes your ethnic group or background. | | | | | | **A** White  Scottish  English  Welsh  Northern Irish  British  Irish  Gypsy/Traveller  Polish  Any other white ethnic group: | | | | | | | | |
| **B** Mixed or multiple ethnic groups  Any other white ethnic group please write here: | | | | | | | | |
| **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 write here: | | | | | | | | |
| **D** African, Caribbean or Black  African, African Scottish or African British  Caribbean, Caribbean Scottish or Caribbean British  Black, Black Scottish or Black British  Other, please write here: | | | | | | | | |
| **E** Other Ethnic Group  Arab  Other, please write here: | | | | | | | | |
| **Do you have caring responsibilities? If yes, please tick all that apply.** | | | | | | | | | | | | | | |
| None: | | | | | Primary carer of a person under 18: | | | | | Primary carer of disabled child/children: | | | | |
| Primary carer of disabled person over 18: | | | | | Primary carer of older person (65+): | | | | | Secondary carer: | | | | |
| **What is your sexual orientation?** | | | | | | | | | | | | | | |
| Heterosexual/ Straight: | | Gay/Lesbian: | | | | | Bisexual: | | | | | Prefer not to say: | | |
| If you prefer to use another term please provide this here: | | | | | | | | | | | | | | |
| **What is your religion?** | | | | | | | | | | | | | | |
| Buddhist: | | | | | Christian: | | | | | Hindu: | | | | |
| Jewish: | | | | | Muslim: | | | | | Sikh: | | | | |
| No religion: | | | | | Any other religion: | | | | | Prefer not to say: | | | | |
| **What is your current work pattern?** | | | | | | | | | | | | | | |
| Full-time | | | | | Part-time | | | | | Prefer not to say | | | | |
| **What is your flexible working arrangement?** | | | | | | | | | | | | | | |
| None | | Flexi-time | | | | | Staggered hours | | | | | Term-time hours | | |
| Annualised hours | | Job-share | | | | | Flexible shifts | | | | | Compressed hours | | |
| Homeworking | | | | | Prefer not to say | | | | | If other, please write in: | | | | |