

Part D - Equal Opportunities Monitoring Form

Please complete this form for the purpose of equal opportunities monitoring. If you have difficulty reading or understanding this form, please contact _____.

The information you provide on this form will be treated as strictly confidential and will not be made available to any person involved with the selection process.

Please answer as many questions as possible. However, if there are questions you would prefer not to answer, please simply move on to the next question.

The information the Organisation gathers helps us to monitor there is no discrimination against applicants or staff.

Monitoring Form Information – Please double click and check the appropriate boxes.

Gender Identity

- Male ☐
Female ☐
Other ☐
I prefer not to answer this question ☐

Marital Status

- Married/Civil Partnership ☐
Single ☐
I prefer not to answer this question ☐

Disability

- Do you consider yourself disabled?
Yes ☐
No ☐
I prefer not to answer this question ☐

Caring Responsibilities

- Are you responsible for dependents?
Yes ☐
No ☐
I prefer not to answer this question ☐

Transgender Status

- Do you consider yourself or have you ever considered yourself to be transgender?
Yes ☐
No ☐
I prefer not to answer this question ☐

Religion

- Which of the following religions, religious denominations or bodies do you currently belong to?
- | | |
|---------------------------------------------|---------------------------------------------------------------|
| None <input type="checkbox"/> | Jewish <input type="checkbox"/> |
| Church of Scotland <input type="checkbox"/> | Muslim <input type="checkbox"/> |
| Roman Catholic <input type="checkbox"/> | Sikh <input type="checkbox"/> |
| Hindu <input type="checkbox"/> | Buddhist <input type="checkbox"/> |
| Other – please specify _____ | I prefer not to answer this question <input type="checkbox"/> |

Sexual Orientation

Are you:

- Heterosexual ☐
Lesbian ☐
Gay ☐
Bisexual ☐
Other ☐
I prefer not to answer this question ☐

Age

Are you:

- Under 21 ☐
21-30 ☐
31-40 ☐
41-50 ☐
51-60 ☐
60+ ☐
I prefer not to answer this question ☐

Ethnic Origin

What is your ethnic group?

White

- Scottish ☐
Other British ☐
Irish ☐
Any other white background ☐
Please specify_____

Mixed

Any mixed background

Please specify_____

Asian, Asian Scottish or Asian British

- Indian ☐
Pakistani ☐
Bangladeshi ☐
Chinese ☐
Any other Asian background ☐
Please specify_____

Black, Black Scottish or Black British

- Caribbean ☐
African ☐
Any other black background ☐
Please specify_____

Other Ethnic Background

- Any other background ☐
Please specify_____

I prefer not to answer this question ☐