** Equal Opportunities Monitoring Form - *Confidential***

To assist us in the monitoring of our Equal Opportunities in Employment Policy we hope you will take the time to complete this form. This is sensitive personal data and will be treated with the utmost confidentiality in line with the requirements of Data Protection legislation. The data will only be used for statistical and monitoring purposes and will be anonymised in any report.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Position applied for:** |  | | **Reference No:** |  |
| **Where did you see this post advertised?** | |  | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Ethnic origin** | | | | |
| How would you describe your ethnic origin? | | | | |
| **Asian, Asian British** | | **African, Caribbean or Black** | | |
| Bangladeshi, Bangladeshi Scottish or Bangladeshi British |  | African, African Scottish or African British |  | |
| Indian, Indian Scottish or Indian British |  | Caribbean, Caribbean Scottish or Caribbean British |  | |
| Pakistani, Pakistani Scottish or Pakistani British |  | Black, Black Scottish or Black British |  | |
| Chinese, Chinese Scottish or Chinese British |  |  | | |
| Any other Asian background, please specify: | | Any other Black background, please specify: | | |
|  | |  | | |
| **White** | | **Mixed or Multiple Ethnic Groups** | | |
| British |  | Any other Mixed background, please specify: | | |
| English |  |  | | |
| Irish |  | **Other Ethnic Group** | | |
| Gypsy/Traveller |  | Arab |  | |
| Scottish |  | Other, Please specify: | | |
| Northern Irish |  |  | | |
| Polish |  | Prefer not to say | |  | |
| Welsh |  |
| Any other White background, please specify: | |
|  | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Age: are you?** | | | | | |
| 16-24 |  | 25-34 |  | 35-44 |  | |
| 45-54 |  | 55-64 |  | 65+ |  | |
| Prefer not to say | |  |  |  |  | |

|  |
| --- |
| **Disability** |

A disabled person under the Disability Discrimination Act 1995 is described as anyone with a “physical or mental impairment which has a substantial and long term adverse effect on his or her ability to carry out normal day to day activities.”

This definition can be broken down to help explain the meaning of disability:

|  |  |
| --- | --- |
| **Physical impairment** | Such as difficulty using your arms or mobility issues which means using a wheelchair or crutches |
| **Mental impairment** | Such as depression or schizophrenia |
| **Sensory impairment** | Such as being blind/having a serious visual impairment or being deaf or having a serious hearing impairment |
| **Learning disability** | Such as Down’s Syndrome, dyslexia or cognitive impairment (autism or head injury) |
| **Long standing illness** | Such as cancer, HIV, diabetes, chronic heart illness or epilepsy |
| **Other** | Such as disfigurement |

|  |  |  |
| --- | --- | --- |
| Do you consider yourself to have a disability | | Yes  No |
| What is the nature of your disability or health condition? |  | |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Gender: are you?** | | | | | | |
| Male |  | Female |  | Prefer not to say | |  | |
| Do you identify yourself as transgender?  *For the purposes of this question, ‘transgender’ is defined as an individual who lives, or wants to live, full time in the gender opposite to that they were assigned at birth.* | | | | | Yes  No | | |
| Male |  | Female |  | Prefer not to say | |  | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Marital status: are you?** | | | | | |
| Married |  | Unmarried |  | Same sex civil partnership |  | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Religion or belief: are you?** | | | |
| Baha’i |  | Buddhist |  | |
| Catholic |  | Church of Scotland |  | |
| Hindu |  | Jain |  | |
| Jewish |  | Muslim |  | |
| Sikh |  | Other religion |  | |
| Do not wish to declare |  | Not religious |  | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Sexual orientation: are you?** | | | |
| Bisexual |  | Gay man/woman |  | |
| Heterosexual/straight |  | Prefer not to say |  | |

**Thank you very much for your time. Please return the completed form with your application.**