# **Equality and Diversity Monitoring Form**

Scotland’s Charity Air Ambulance (SCAA) is committed to diversity and equal opportunities. This means we provide equal opportunities to any employee or job applicant and do not discriminate either directly or indirectly because of race, sex, sexual orientation, transgender status, religion or belief, marital or civil partnership status, age, disability, or pregnancy and maternity.

We would appreciate if you complete and return this form to help us understand the diversity of our job applicants.

**Completing this form is voluntary. All applicants will be treated the same whether they complete this form or not.**

None of the information you provide will be linked to your application. It will be stored separately from your application. It will be used only to provide statistics for monitoring purposes.The information provided will be kept confidential.

Please return the completed form to recruitment@scaa.org.uk

We have asked for your name so that we can monitor applications at shortlisting and appointment stages, as well as the application stage.

|  |  |
| --- | --- |
| **Position applied for:** |  |
| **Name of individual:** |  |
| **Where did you see this position advertised?** |  |

## Age

What is your age?

[ ]  19 or under

[ ]  20 to 29

[ ]  30 to 39

[ ]  40 to 49

[ ]  50 to 59

[ ]  60 to 69

[ ]  70+

[ ]  Prefer not to say

## Disability

Do you have a disability, impairment or health condition which affects your day-to-day activities?
[ ]  Yes
[ ]  No
[ ]  Prefer not to say

The information in this form is for monitoring purposes only. If you believe you need a reasonable adjustment, then please discuss this with the member of the team receiving applications for this position.

## Ethnicity

What is your ethnicity? This may be different to your nationality, place of birth or citizenship.

### Asian or Asian British

[ ]  Asian British

[ ]  Bangladeshi

[ ]  Chinese

[ ]  Indian

[ ]  Pakistani

[ ]  Another Asian background, please say what:Click or tap here to enter text.

[ ]  Prefer not to say

### Black, African, Caribbean or Black British

[ ]  African

[ ]  Black British

[ ]  Caribbean

[ ]  Another Black, African or Caribbean background, please say what:Click or tap here to enter text.

[ ]  Prefer not to say

### Mixed or Multiple ethnic groups

[ ]  Asian and White

[ ]  Black African and White

[ ]  Black Caribbean and White

[ ]  Another Mixed or Multiple ethnic group, please say what:Click or tap here to enter text.
[ ]  Prefer not to say

### White

[ ]  British

[ ]  English

[ ]  Gypsy or Irish Traveller

[ ]  Irish

[ ]  Northern Irish

[ ]  Scottish

[ ]  Welsh

[ ]  Other European

[ ]  Another White background, please say what:Click or tap here to enter text.

[ ]  Prefer not to say

### Another ethnic group

[ ]  Arab

[ ]  Another ethnic group, please say what:Click or tap here to enter text.

[ ]  Prefer not to say

## Religion or belief

What is your religion or belief?

[ ]  No religion or belief

[ ]  Buddhist

[ ]  Christian

[ ]  Hindu

[ ]  Jewish

[ ]  Muslim

[ ]  Sikh

[ ]  Another religion or belief, please say which:Click or tap here to enter text.

[ ]  Prefer not to say

## Sex

What is your sex?

[ ]  Female

[ ]  Male

[ ]  Prefer to self describe, please say how:Click or tap here to enter text.

[ ]  Prefer not to say

## Gender identity

Which of the following best reflects how you would describe your gender identity?

[ ]  Female

[ ]  Male

[ ]  In another way

If you would like to, please say how you describe your gender identity: Click or tap here to enter text.

## Gender reassignment

Is the gender you identify with the same as your sex recorded at birth?

[ ]  Yes

[ ]  No

[ ]  Prefer not to say

## Sexual orientation

What is your sexual orientation?

[ ]  Asexual

[ ]  Bisexual

[ ]  Gay

[ ]  Heterosexual

[ ]  Lesbian

[ ]  Pansexual

[ ]  Questioning

[ ]  Prefer to self-describe, please say how:Click or tap here to enter text.

[ ]  Prefer not to say

## Marital status

What is your marital status?

[ ]  Married or in a civil partnership

[ ]  Single

[ ]  Other

[ ]  Prefer not to say

## Caring Responsibilities

## Do you have caring responsibilities? Do you provide care or support for someone with a long-term physical or mental health condition, illness, or age-related issue? Please tick all that apply.

[ ]  I am not a carer

[ ]  Primary carer

[ ]  Secondary carer (another person carries out the main caring role)

## Working pattern

## What is your current working pattern?

[ ]  Full-time

[ ]  Part-time

**Data protection:** We treat personal data collected for reviewing equality of opportunity in recruitment and selection within our organisation in accordance with our [Recruitment Privacy Notice](https://www.scaa.org.uk/our-mission/about-scaa/join-our-team/).

By completing and submitting this form I agree to give my consent to Scotland’s Charity Air Ambulance to process the data supplied in this form for the purpose of equality, diversity and inclusion (EDI) monitoring in recruitment and selection.

I acknowledge that my application will be treated the same regardless of whether I complete this form or not.