**Equal Opportunities Monitoring Form**

This form will not be seen by the Interviewer/Panel prior to interview and is not used in any decision-making.

You do not have to complete this form but doing so enables us to monitor the effectiveness of our Equal Opportunities Policy.

We recognise the benefits of a diverse workforce. We are committed to treating all job applicants and employees with dignity and respect regardless of race, ethnic background, nationality, colour, gender, trans-gender status, pregnancy, disability, age, sexual orientation, religion or belief. We therefore welcome applications from all sections of the community.

Please state which job you have applied for:

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| How would you describe yourself? (Please tick one box) |
| A |
| [ ]  Asian or Asian British |
| [ ]  Bangladeshi |
| [ ]  Indian |
| [ ]  Pakistani |
| [ ]  Any other Asian background, please state -  |
| B |
| [ ]  Black or Black British |
| [ ]  African |
| [ ]  Caribbean |
| [ ]  Any other Black background, please state -  |
| C |
| [ ]  Chinese or other ethnic group |
| [ ]  Chinese |
| [ ]  Any other, please state -  |
| D |
| [ ]  Mixed heritage  |
| [ ]  White and Asian |
| [ ]  White and Black African |
| [ ]  White and Black Caribbean |
| Any other Mixed background, please state - |
| E |
| [ ]  White |
| [ ]  British  |
| [ ]  English |
| [ ]  Irish |
| [ ]  Scottish |
| [ ]  Welsh |
| [ ]  Any other White background, please state -  |
| F |
| [ ]  Prefer not to say  |

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| What is your gender?  |
| [ ]  Female  |
| [ ]  Male |
| [ ]  Prefer not to say  |
| [ ]  Prefer to self-describe, please state -  |

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| Is your present gender the same as assigned at your birth? |
| [ ]  Yes  |
| [ ]  No |
| [ ]  Prefer not to say |

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| What is your age group? |
| [ ]  16-17 |
| [ ]  18-21 |
| [ ]  21-29 |
| [ ]  30-39 |
| [ ]  40-49 |
| [ ]  50-59 |
| [ ]  60 or over |
| [ ]  Prefer not to say  |

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| What is your sexual orientation? |
| [ ]  Heterosexual |
| [ ]  Bisexual  |
| [ ]  Gay woman/Lesbian |
| [ ]  Gay man/Homosexual |
| [ ]  Other |
| [ ]  Prefer not to say  |
| [ ]  Prefer to self-describe, please state -  |

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| What is your religious or belief system  |
| [ ]  Buddhist |
| [ ]  Christian |
| [ ]  Hindu |
| [ ]  Jewish |
| [ ]  Muslim |
| [ ]  Sikh |
| [ ]  No Religion |
| [ ]  Other |
| [ ]  Prefer not to say |

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| Do you consider yourself to have a disability or long-term health condition? |
| [ ]  Yes |
| [ ]  No |
| [ ]  Prefer not to say  |