

## EQUAL OPPORTUNITIES MONITORING FORM

We are an equal opportunities employer and as such we ask all candidates to complete and return this Equal Opportunities Monitoring Form. Your returned form will be stored separately from your application.

The data gathered will help us to monitor the effectiveness of our equal opportunities policies and procedures. It should be completed anonymously and will be held and processed separately from your application.

**THIS INFORMATION WILL HAVE NO IMPACT ON THE FINAL RECRUITMENT DECISION.**

Position applied for	
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In each section listed below, please choose one option by marking 'X' in the appropriate box.

### AGE

16-24		25 -29		30-34		35-39	
40-44		45-49		50-54		55-59	
60-65		Prefer not to say					

### DISABILITY

The Equality Act 2010 defines a disability as a physical or mental impairment that has a substantial and long-term adverse on an individual's ability to carry out normal day-to-day activities.

Do you consider that you have a disability?

Yes		No		Prefer not to say	
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### GENDER

Male		Female	
Transgender/Non-Binary		Prefer not to say	

If you are undergoing the process of gender assignment, please state your future gender.

### MARITAL OR CIVIL PARTNERSHIP STATUS

Married		In a registered civil partnership	
Not married / in a civil partnership		Separated	
Divorced		Widowed	
Prefer not to say			

**ETHNIC GROUP**

Asian / Asian British		Black / Black British	
Bangladeshi		African	
Chinese		Caribbean	
Indian			
Pakistani			
Other Asian background (please specify)		Other Black background (please specify)	

Mixed Ethnic Group		White	
White and Asian		White British	
White and Black African		White Irish	
White and Black Caribbean			
Other Mixed background (please specify)		Other White background (please specify)	

<b>Other Ethnic Group</b> (please specify)	
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Prefer not to say	
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**SEXUAL ORIENTATION**

Bisexual		Homosexual / Gay / Lesbian	
Heterosexual		Prefer not to say	

**RELIGION OR BELIEF**

Buddhist		Christian	
Hindu		Jewish	
Muslim		No religion	
Sikh		Prefer not to say	
Other religion or belief (please specify)			

Date	
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Please do not sign this form.