Equality and Diversity Monitoring Form

This form is entirely optional. Any information you provide is treated in the strictest confidence and does not form part of your application.

1. Gender

 Female Male Intersex Other Prefer not to say

Is your gender identity inconsistent with (different from) the sex you were assigned at birth?

 Yes No

2. Age Range

0 – 16 17 – 25 26 – 45

46 – 65 66 – 80 81 +

3. Do you consider yourself disabled under the terms of the Equality Act 2010?

The Equality Act defines a disabled person as someone who has a physical or mental impairment that has a substantial and long-term adverse effect on his or her ability to carry out normal day-to-day activities.

 Yes No

4. Religion or Belief

 Buddhist Jewish No religion

Christian Muslim Prefer not to say

Hindu Sikh Other, please state: …………………

5. Sexual Orientation

 Bisexual Heterosexual

 Gay man Prefer not to say

 Gay woman / lesbian Other, please state: …………………

6. Ethnic Group

**White Asian or Asian British**

British Indian

English Pakistani

Welsh Bangladeshi

Scottish Other, please state: ………….

Irish **Chinese or Chinese British**

Other, please state: ……… Chinese

**Mixed** Other, please state: ………….

 White and Black Caribbean **Traveller**

 White and Black Africa Gypsy

 White and Black Asian Irish Traveller

 Other, please state: ……… Roma

**Black or Black British** Other, please state: …………

 Caribbean

 African

 Other, please state: ………

7. Language Preference

 English BSL Other, please state: …………

8. Carer Status

Do you provide unpaid care to another person?

 Yes No Prefer not to say