

# Equality and Diversity Monitoring Form

The intention of monitoring and analysis is to establish if there are different success rates between genders, people of different sexual orientation, ages, different ethnic backgrounds or faiths, and people with disabilities. If there are differences in success rates it will enable action to be taken to ensure that no group is treated unfairly. Your answers will be treated confidentially and will not affect your application in any way.

## Personal Details:

Title	Mr / Mrs / Miss / Ms / Dr / Other
Surname:	
First name:	
Age:	16-24 <input type="checkbox"/> 25-34 <input type="checkbox"/> 35-44 <input type="checkbox"/> 45-54 <input type="checkbox"/> 55-64 <input type="checkbox"/> 65+ <input type="checkbox"/>
Gender:	Male <input type="checkbox"/> Female <input type="checkbox"/> Prefer not to say <input type="checkbox"/>
Gender Identity (if appropriate)	If you identify as transsexual, transgender (in that you have effected a permanent change of gender identity) or as intersex which group do you identify with?  Transsexual <input type="checkbox"/> Transgender <input type="checkbox"/> Intersex <input type="checkbox"/>
Working Pattern:	Part time <input type="checkbox"/> Full time <input type="checkbox"/> Job Share <input type="checkbox"/> Other.....

## Ethnic origin: Please tick against one of the following:

<b>Asian or Asian British</b>		<b>Mixed</b>	
Bangladeshi	<input type="checkbox"/>	Black and White Caribbean	<input type="checkbox"/>
Indian	<input type="checkbox"/>	Black and White African	<input type="checkbox"/>
Pakistani	<input type="checkbox"/>	Asian and White	<input type="checkbox"/>
Any other Asian background	<input type="checkbox"/>	Any other mixed background	<input type="checkbox"/>
Please specify below if you wish.....		Please specify below if you wish.....	
.....		.....	
<b>Black or Black British</b>		<b>White</b>	
African	<input type="checkbox"/>	British	<input type="checkbox"/>
Caribbean	<input type="checkbox"/>	English	<input type="checkbox"/>
Any other Black background		Irish	<input type="checkbox"/>
Please specify below if you wish.....		Scottish	<input type="checkbox"/>
.....		Welsh	<input type="checkbox"/>
		Any other White background	<input type="checkbox"/>
		Please specify below if you wish.....	
		.....	
<b>Chinese or Other ethnic group</b>	<input type="checkbox"/>	Prefer not to say	<input type="checkbox"/>
Chinese	<input type="checkbox"/>		
Any other			
Please specify below if you wish.....			
.....			

**Disability: Please tick against one of the following:**

Do you consider yourself to have a disability within the meaning of the Disability Discrimination Act 1995?

*The Disability Discrimination Act 1995 defines a disabled person as someone who has a physical or mental impairment, which has a substantial and adverse long-term effect on his or her ability to carry out normal day-to-day activities. Conditions covered may include, for example, severe depression, dyslexia, diabetes, epilepsy and arthritis*

Yes  No  Prefer not to say

Please describe the nature of your disability

*This information is provided for monitoring purposes only – if you need any reasonable adjustments you should arrange these separately.*

**Religion or belief: Please tick against one of the following**

No religion	<input type="checkbox"/>	Jewish	<input type="checkbox"/>
Baha'i	<input type="checkbox"/>	Muslim	<input type="checkbox"/>
Buddhist	<input type="checkbox"/>	Sikh	<input type="checkbox"/>
Christian	<input type="checkbox"/>	Other	<input type="checkbox"/>
Hindu	<input type="checkbox"/>	Please specify below if you wish.....	
Jain	<input type="checkbox"/>	.....	
		Prefer not to say	<input type="checkbox"/>

**Sexual Orientation: Please tick against one of the following**

Bisexual	<input type="checkbox"/>	Gay Man/Homosexual	<input type="checkbox"/>
Gay Woman/Lesbian	<input type="checkbox"/>	Heterosexual/straight	<input type="checkbox"/>
Prefer not to say	<input type="checkbox"/>		

Please indicate which media/journal you saw this position advertised in.....

**Thank you for completing this form**