

Equality Monitoring and Recruitment Analysis Form

The questions set out in this form help us to monitor the effectiveness of our Equality, Diversity, and Inclusion policy, including the social mobility of our staff team. The information collected enables us to build an accurate picture of the make-up of our workforce and the inclusiveness of our recruitment processes.

We need your help and co-operation to do this, and ask you to voluntarily complete this monitoring form and in so doing, consent to this data being used for the purpose described above.

**The information you provide will not influence any appointment decisions and will:**

1. Be anonymously collated for data monitoring purposes only and in compliance with UK law and the EU General Data Protection Regulation (GDPR).
2. Stay confidential.
3. Be stored securely, anonymously, and confidentially according to the requirements of our Data Protection and Privacy Policy.
4. Be separated from your application upon receipt.
5. **Not** form part of your application, or be used to assess your suitability for employment, or be seen by interviewers or those involved in shortlisting your application.

# What is the position you are applying for:

|  |
| --- |
|  |

**Where did you see this post advertised or how did you learn of this position?**

|  |
| --- |
|  |

**Please choose one option from each of the sections listed below and then tick or place an X in the appropriate box**.

# Your age

|  |  |
| --- | --- |
| 16 to 24 years |  |
| 25 to 34 years |  |
| 35 to 44 years |  |
| 45 to 54 years |  |
| 55 to 64 years |  |
| 65 years or above     |  |
| You would prefer not to say  |  |

## What is your date of birth?

|  |
| --- |
|  |

## Do you have caring responsibilities? Please mark all that apply.

|  |  |
| --- | --- |
| None |  |
| Primary carer of a child or children aged under 18 years |  |
| Primary carer of a disabled child or children  |  |
| Primary carer of a disabled adult aged 18 years or more |  |
| Primary carer of an older person or people aged 65 years or more |  |
| Secondary carer (another person carries out the main caring role) |  |
| You would prefer not to say |  |

## Are you disabled or do you live with a long-term illness or health condition?

**The information in this section is purely for monitoring purposes only. Therefore, if you believe you need a ‘reasonable adjustment’, then please discuss this with your manager, or the manager running the recruitment process if you are a job applicant.**

|  |  |
| --- | --- |
| Yes |  |
| No |  |
| You would prefer not to say |  |

**Please mark any of the following that apply to you.**

|  |  |
| --- | --- |
| Blind or sight loss |  |
| Deaf or hearing loss |  |
| Mobility – e.g., difficulty walking short distances or climbing stairs |  |
| Manual dexterity |  |
| Learning disability, where a person learns in a different way –e.g., dyslexia |  |
| Mental illness – e.g., schizophrenia, depression |  |
| Speech impairment |  |
| Cognitive disability – e.g., brain injury, autism, attention deficit, hyperactivity disorder or Asperger’s syndrome |  |
| Other impairment – e.g., epilepsy, cardiovascular conditions, asthma, cancer, facial disfigurement, sickle cell anaemia, or progressive condition such as motor neurone disease |  |
| Other (please specify) |  |
|  |
| You would prefer not to say |  |

## Preferred and Spoken Language(s)

## Please list your preferred language and any languages you are able to speak.

|  |
| --- |
|  |

## Your ethnicity

## Asian / Asian British

|  |  |
| --- | --- |
| Bangladeshi |  |
| Chinese  |  |
| Indian  |  |
| Pakistani |  |
| Any other Asian background (specify below if you wish) |  |
|  |

## Black / African / Caribbean / Black British

|  |  |
| --- | --- |
| African |  |
| Caribbean |  |
| Any other Black/ African/ Caribbean background (if you would prefer to use your own definition, please specify below) |  |
|  |

## Arab Ethnic Group

|  |  |
| --- | --- |
| Middle Eastern |  |
| North African |  |
| Any other Arab Ethnic Group (if you would prefer to use your own definition, please specify below) |  |
|  |  |

## Mixed / Multiple Ethnic Groups

|  |  |
| --- | --- |
| White and Arab/Middle Eastern/North African |  |
| White and Asian |  |
| White and Black African |  |
| White and Black Caribbean  |  |
| Any other Mixed background (if you would prefer to use your own definition, please specify below) |  |
|  |

## White

|  |  |
| --- | --- |
| Eastern European |  |
| English |  |
| European |  |
| Gypsy or Irish Traveller |  |
| Irish |  |
| Northern Irish |  |
| Scottish |  |
| Welsh |  |
| Any other White background (if you would prefer to use your own definition, please specify below) |  |
|  |

**Do not wish to declare**

|  |  |
| --- | --- |
| You would prefer not to say |  |

## Your gender

|  |  |
| --- | --- |
| Female |  |
| Male |  |
| Non-binary |  |
| Trans Female / Trans Woman |  |
| Trans Male / Trans Man |  |
| If you would prefer to use your own term, please provide this below  |  |
|  |
| You would prefer not to say |  |

## Your sexual orientation

**Which of the following options best describes how you think of yourself?**

|  |  |
| --- | --- |
| Bisexual |  |
| Gay Man |  |
| Gay Woman / Lesbian |  |
| Heterosexual / Straight |  |
| I do not know or am unsure |  |
| Queer |  |
| If your sexual orientation is not listed or you would prefer to use your own term, please provide this below |  |
|  |
| You would prefer not to say |  |

## Your Religion or Belief

**Which group below do you most identify with?**

|  |  |
| --- | --- |
| Buddhist |  |
| Christian  |  |
| Hindu  |  |
| Jewish  |  |
| Muslim  |  |
| Non-religious (Atheist, Humanist etc) |  |
| Sikh |  |
| Other |  |
| If you prefer to use your own definition, please provide this below |  |
|  |
| You would prefer not to say |  |

## What is your legal marital or same-sex civil partnership status?

|  |  |
| --- | --- |
| Divorced |  |
| Married/in a Civil Partnership |  |
| Not Married/in a Civil Partnership |  |
| Widowed |  |
| If you prefer to use your own definition, please provide this below |  |
|  |
| You would prefer not to say |  |

## Your social mobility

**Did any of your parent(s) or guardian(s) complete a university degree course or equivalent (e.g., BA, BSc or higher)?**

|  |  |
| --- | --- |
| Yes |  |
| No |  |
| Don’t know |  |
| You would prefer not to say |  |

**What type of school did you mainly attend between the ages of 11 and 16?**

|  |  |
| --- | --- |
| A state-run or state-funded school – selective on academic, faith or other grounds |  |
| A state-run or state-funded school – non-selective |  |
| Independent or fee-paying school |  |
| Attended school outside the UK |  |
| Don’t know |  |
| You would prefer not to say |  |

**Which of these qualifications do you have to date? (Please tick all that apply)**

|  |  |
| --- | --- |
| 1 - 4 O levels / CSEs / GCSEs (any grades), Entry Level, Foundation Diploma |  |
| NVQ Level 1, Foundation GNVQ, Basic Skills |  |
| 5+ O levels (passes) / CSEs (grade 1) / GCSEs (grades A\*- C), School Certificate, 1 A level/2 - 3 AS levels/VCEs, Higher Diploma |  |
| NVQ Level 2, Intermediate GNVQ, City and Guilds Craft, BTEC First/General Diploma, RSA Diploma |  |
| Apprenticeship |  |
| 2+ A levels/VCEs, 4+ AS levels, Higher School Certificate, Progression/Advanced Diploma |  |
| NVQ Level 3, Advanced GNVQ, City and Guilds Advanced Craft, ONC, OND, BTEC National, RSA Advanced Diploma |  |
| Undergraduate degree (e.g., BA, BSc) |  |
| Master’s degree (e.g., MA, MSc) |  |
| Doctorate degree (e.g., PhD) |  |
| NVQ Level 4 - 5, HNC, HND, RSA Higher Diploma, BTEC Higher Level |  |
| Professional qualifications (e.g., teaching, nursing, accountancy) |  |
| Other vocational/work-related qualifications |  |
| Non-UK qualifications |  |
| No qualifications |  |
| You would prefer not to say |  |

**Did either (or both) of the following apply at any point during your school years?**

|  |
| --- |
| Your household received income support: |
| Yes |  |
| No |  |
| Don’t know |  |
| You would prefer not to say |  |
| You received free school meals: |
| Yes |  |
| No |  |
| Don’t know |  |
| You would prefer not to say |  |

## Thank you very much for completing this form.