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| EQUAL OPPORTUNITIES |
| In order to monitor the effectiveness of our Equal Opportunities Policy, all applicants are requested to complete this form. All information will be treated confidentially and will be separated from your application on receipt. Information provided will not inform the selection process. |

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| ETHNIC ORIGIN |

*Choose ONE section from 1-5, then tick the appropriate box to indicate your cultural background.*

**1. White**

1.1 British

1.2 Irish

1.3 Other White background

1. **Asian or Asian British**

2.1 Indian

2.2 Pakistani

2.3 Bangladeshi

2.4 Other Asian background

1. **Black or Black British**

3.1 Black Caribbean

3.2 Black African

3.3 Black British

3.4 Other Black background

**4. Mixed**

4.1 White and Black Caribbean

4.2 White and Black African

4.3 White & Asian

4.4 Any other mixed background

**5. Chinese or Other Ethnic Group**

5.1 Chinese

5.2 Other Ethnic Group

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| DISABILITY STATUS |

Do you consider yourself to be disabled? Yes  No

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| GENDER IDENTITY |

Woman (including trans woman)  Man (including trans man)  Non-binary

In another way (Please state)

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| IS YOUR GENDER IDENTITY THE SAME AS THE GENDER YOU WERE GIVEN AT BIRTH? |

Yes  No

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| WHICH OF THE FOLLOWING OPTIONS BEST DESCRIBES YOUR SEXUAL ORIENTATION? |

Heterosexual/ Straight  Gay  Gay Woman/ Lesbian  Bisexual

Other Sexual Orientation not listed (please state)

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| AGE |

16-19  20-29  30-39  40-49  50-59  60+

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| HOW DID YOU HEAR ABOUT THIS VACANCY? |
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Thank you for taking the time to complete this questionnaire*.*