

Equality and Diversity Monitoring Form

The intention of this monitoring form is to establish whether 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. The information you supply here will be kept separately from your application details.

Personal Details

Title	Mr / Mrs / Miss / Ms / Dr / Other
Surname:	
First name:	
Age:	16-24 [] 25-34 [] 35-44 [] 45-54 [] 55-64 [] 65+ []
Gender	Male [] Female [] Prefer not to say [] Non-binary [] Other []
Is your gender the same as the one that you were assigned at birth?	Yes [] No []

Ethnic Origin

Asian or Asian British		Mixed	
Bangladeshi	[]	Black and White Caribbean	[]
Indian	[]	Black and White African	[]
Pakistani	[]	Asian and White	[]
Any other Asian background	[]	Any other mixed background	[]
Please specify below if you wish		Please specify below if you wish	
.....		

Black or Black British African <input type="checkbox"/> [] Caribbean <input type="checkbox"/> [] Any other Black background Please specify below if you wish 	White British <input type="checkbox"/> [] English <input type="checkbox"/> [] Irish <input type="checkbox"/> [] Scottish <input type="checkbox"/> [] Welsh <input type="checkbox"/> [] Any other White background <input type="checkbox"/> [] Please specify below if you wish
Chinese or Other ethnic group Chinese Any other <input type="checkbox"/> [] Please specify below if you wish <input type="checkbox"/> [] 	Prefer not to say <input type="checkbox"/> []

Disability

Do you consider yourself to have a disability under the Equality Act 2010?

In the Act, a person has a disability if:

- they have a physical or mental impairment
- the impairment has a substantial and long-term adverse effect on their ability to perform normal day-to-day activities

For the purposes of the Act, these words have the following meanings

- 'substantial' means more than minor or trivial
- 'long-term' means that the effect of the impairment has lasted or is likely to last for at least twelve months (there are special rules covering recurring or fluctuating conditions)
- 'normal day-to-day activities' include everyday things like eating, washing, walking and going shopping

Yes [] No [] Prefer not to say []

Please describe the nature of your disability

Type here...

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

Religion or belief

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

Bisexual / Pansexual	<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"/>		
Other	<input type="checkbox"/>		

Please indicate where you saw this position advertised:

Thank you for completing this form