

Equality and Diversity Monitoring Form

The intention of this monitoring form is to ensure that we are reaching a wide and diverse stream of candidates for our board positions. We believe that a diverse board can only strengthen us and to that end we want to understand if we are reaching as far as we can, learn from the information we collect and improve our processes. 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		White	
African	[]	British	[]
Caribbean	[]	English	[]
Any other Black background		Irish	[]
Please specify below if you wish		Scottish	[]
		Welsh	[]
		Any other White background	[]
		Please specify below if you wish	
Chinese or Other ethnic group		Prefer not to say	[]
Chinese			
Any other	[]		
Please specify below if you wish	[]		



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

•	twelve months (there are special rules covering recurring or fluctuating conditions)					
Yes	[]	No	[]	Prefer not to say	[]	
Please	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

[]	Jewish	[]
[]	Muslim	[]
[]	Sikh	[]
[]	Other	[]
[]	Please specify below if you wish	
[]		
	Prefer not to say	[]
	[] [] []	 [] Muslim [] Sikh [] Other [] Please specify below if you wish []



Sexual Orientation

Bisexual / Pansexual	[]	Gay Man / Homosexual	[]
Gay Woman / Lesbian	[]	Heterosexual / straight	[]
Prefer not to say	[]		
Other	[]		

Please indicate where you saw this position advertised:

Thank you for completing this form