Comics Youth CIC
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T: 07525369624
Registered Company
Number: 09549165

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Equal Opportunities Monitoring Form

This form should be kept separate from interviewing personnel to avoid the risk of a discrimination claim.

In accordance with its equal opportunities statement, the company will provide equal opportunities to all employees and job applicants, and will not discriminate either directly or indirectly on the grounds of age, disability, gender reassignment, marriage or civil partnership, pregnancy or maternity, religion or belief, sex or sexual orientation.

In order for the organisation to ensure compliance with its equal opportunities policy statement, a system of monitoring has been set up. We have only asked for your name so that monitoring can take place at both the short-listing for interview stage and at the appointment stage. Once an appointment has been made, the data given on this form will be stored on the computer in an anonymised format and the form will then be destroyed.

You may, of course, decide not to answer one or any of these questions, but if you do respond, all information provided will be treated in the strictest confidence and used only for the purposes of providing statistics for equal opportunities monitoring. The monitoring form does not form part of your application and will therefore be detached from it on receipt and stored separately. You can always email this form separately, if you wish.

Thank you for your assistance in completing this form. Please return as a Word Document format.

What best describes your gender?		
Male ☐	Female ☐	Prefer not to say ☐
Prefer to self-describe:		

Is your gender identity the same as the sex you were assigned at birth?		
Yes ☐	No ☐	Prefer not to say ☐

What is your sexual orientation?				
Bi ☐	Heterosexual/Straight ☐	Gay Man ☐	Gay Woman/Lesbian ☐	Prefer not to say ☐

Prefer to self-describe:

What is your marital status?		
Married/Civil Partnership ☐	Single ☐	Prefer not to say ☐
Prefer to self describe:		

What is your age?			
Under 18 ☐	18–29 ☐	30–39 ☐	40–49 ☐
50–59 ☐	60–65 ☐	Over 65 ☐	Prefer not to say ☐

Do you consider yourself to have a disability or health condition?		
Yes ☐	No ☐	Prefer not to say ☐
You can let us know more by:		
Talking confidentially over the phone to a member of Comics Youth CIC Staff (07525369624) ☐	Through someone else such as an advocate, parent or carer (07525369624) ☐	In writing (please attach) ☐

The information in this form is for monitoring purposes only. We are committed to meeting the needs of people with learning difficulties or disabilities, so please let us know if you require additional support during the recruitment process.

What is your ethnic group?				
White				
English/Welsh/Scottish/Northern Irish/British ☐	Irish ☐	Gypsy or Irish Traveller ☐	Any other White background please describe:	
Mixed/Multiple Ethnic Groups				
White and Black Caribbean ☐	White and Black African ☐	White and Asian ☐	Any other Mixed/Multiple ethnic background, please describe:	
Asian/Asian British				
Indian ☐	Pakistani ☐	Bangladeshi ☐	Chinese ☐	Any other Asian background, please describe:
Black/African/Caribbean/Black British				
African ☐	Caribbean ☐		Any other Black/African/Caribbean background, please describe:	
Other ethnic group				
Arab ☐			Any other ethnic group, please describe:	
Prefer not to say ☐				

What is your religion?			
No religion ☐	Buddhist ☐	Hindu ☐	Christian (including Church of England, Catholic, Protestant and all other Christian denominations) ☐
Jewish ☐	Muslim ☐	Sikh ☐	Any other religion, prefer to self-describe:
Prefer not to say ☐			

For the purposes of compliance for *The General Data Protection Regulation 2016/679*, I hereby confirm that, by completing this form, I give my consent to the company processing the data supplied on this form for the purposes of equal opportunities monitoring.

Signed: Name:
Date: