

## Equality and Diversity Monitoring Form

Global Link is committed to promoting equality and eliminating unlawful discrimination. This includes building an accurate picture of the make-up of the workforce in encouraging equality and diversity.

As part of our monitoring processes we ask for your co-operation in answering the questions below. Completing this form is voluntary and we understand that some of this information is personal and sensitive in nature. However, gathering this data helps us to better understand if we are achieving diversity in the range of people we employ and to change our approach if some groups are not represented.

The information you provide is anonymous and will not be stored with any identifying information about you. The data will only be used for general statistical and monitoring purposes and will not be taken into account regarding your application. All details are treated in line with the requirements of Data Protection legislation.

Please return the completed form to: [info@globalink.org.uk](mailto:info@globalink.org.uk) or: Global Link, YMCA, New Road, Lancaster LA1 1EZ. If you would like help completing this form, please contact us.

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### What is your gender?

Male ☐ Female ☐ I self-identify as: ..... Prefer not to say ☐

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### What age group do you belong to?

18-24 ☐ 25-29 ☐ 30-34 ☐ 35-39 ☐ 40-44 ☐ 45-49 ☐  
50-54 ☐ 55-59 ☐ 60-64 ☐ 65+ ☐ Prefer not to say ☐

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### What is your ethnic group?

Ethnic origin is not about nationality, place of birth or citizenship. It is about the group to which you perceive you belong. Please tick the appropriate box.

Prefer not to say ☐

#### Asian or Asian British

Bangladeshi ☐ Chinese ☐ Indian ☐ Pakistani ☐  
Any other Asian background, please describe: .....

#### Black or Black British

African ☐ Caribbean ☐  
Any other Black/African/Caribbean background, please describe: .....

#### White

British/English/Northern Irish/Scottish/Welsh/ ☐ Irish ☐ Gypsy or Irish Traveller ☐  
Any other white background, please describe: .....

#### Other ethnic group

Arab ☐ Any other ethnic group, please describe: .....

#### Mixed / multiple ethnic groups

Asian & White ☐ Black African & White ☐ Black Caribbean & White ☐  
Any other mixed background, please describe: .....

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**What is your nationality?**

Please describe your nationality: ..... Prefer not to say ☐

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**Which of the following options best describes your sexual orientation?**

Bisexual ☐ Gay or Lesbian ☐ Heterosexual ☐ Other ☐ Prefer not to say ☐

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**What is your religion or belief?**

Buddhist ☐ Christian ☐ Hindu ☐ Jewish ☐ Muslim ☐ Sikh ☐ Other ☐

No religion/atheist ☐ Prefer not to say ☐

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**Do you consider yourself to have a disability or health condition?**

Yes ☐ No ☐ Prefer not to say ☐

If you have answered yes, what is the effect or impact of your disability or health condition on your ability to give your best at work? Please describe here:

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**Do you have caring responsibilities? Please tick all that apply**

None ☐ Primary carer of a child/children under 18 ☐

Primary carer of disabled child/children ☐

Primary carer of disabled adult(s) (18 or over) ☐ Primary carer of older person ☐ Secondary carer (another person carries out the main caring role) ☐

Prefer not to say ☐

**Thank you for completing this form.**