

EQUALITY & DIVERSITY MONITORING FORM

AGE

25-29		30-35	
36-40		41-46	
47-54		54-60	
61-65		66+	

DISABILITY

A disabled person is defined under the Equality Act 2020 as someone with a **‘physical or mental impairment which has a substantial and long term adverse effect on that person’s ability to carry out normal day to day activities’**

Do you consider yourself to be disabled in the Equality Act 2020? Please mark ‘X’ in the appropriate Box

YES		NO	
PREFER NO TO SAY		DON’T KNOW	

If YES please answer the following questions and proceed to the next section

Please indicate by marking ‘X’ in the appropriate box all that apply:

A		Hearing impairment
B		Visual impairment
C		Speech impediment
D		Mobility impairment
E		Physical co-ordination difficulties
F		Reduced physical impairment
G		Severe disfigurement
H		Learning difficulties
I		Mental ill health
J		Progressive conditions
K		Other (please specify below)

ETHNIC ORIGIN

The SSLEP wants to ensure that all applicants are treated equally, whatever their race, colour or ethnic origin. To do this, we need to know about the ethnic origin of people who apply to join us. These categories were used in the 2011 Census and are listed alphabetically. Which groups do you most identify with?

Please mark 'X' in only **ONE box in column A** and only **ONE box in column B**

COLUMN A

A	<input type="checkbox"/>	British or Mixed British
B	<input type="checkbox"/>	English
C	<input type="checkbox"/>	Irish
D	<input type="checkbox"/>	Scottish
E	<input type="checkbox"/>	Welsh
F	<input type="checkbox"/>	Any other (please specify)

COLUMN B

ASIAN

A	<input type="checkbox"/>	Bangladeshi
B	<input type="checkbox"/>	Indian
C	<input type="checkbox"/>	Pakistani
D	<input type="checkbox"/>	Any other Asian background (please specify)

BLACK

E	<input type="checkbox"/>	African
F	<input type="checkbox"/>	Caribbean
G	<input type="checkbox"/>	Any other black background (please specify)

CHINESE

H	<input type="checkbox"/>	Any Chinese backgroup (please specify)

MIXED ETHNIC

I	<input type="checkbox"/>	Asian & White
J	<input type="checkbox"/>	Black African & White
K	<input type="checkbox"/>	Black caribbean & White
L	<input type="checkbox"/>	Any other Mixed ethnic background (please specify)

SEX

Please state your sex:

FEMALE

MALE

SEXUAL ORIENTATION

The SSLEP wants to ensure that all applicants are treated equally, whatever their sexual orientation. To do this, we need to know about the sexual orientation of people who apply to join us. We should therefore be grateful if you would complete the following question. Your answer will be treated in the strictest confidence and will not affect your application in any way.

Which group do you most identify with? The options are listed in alphabetical order.

Please mark 'X' in one box only:

- | | | |
|---|--------------------------|-----------------------|
| A | <input type="checkbox"/> | Bi-sexual |
| B | <input type="checkbox"/> | Gay woman/lesbian |
| C | <input type="checkbox"/> | Gay man |
| D | <input type="checkbox"/> | Heterosexual/straight |
| E | <input type="checkbox"/> | Other |
| F | <input type="checkbox"/> | Prefer not to say |

RELIGION OR BELIEF

What is your religion or belief (including non-belief)? Please mark 'X' in the box below as appropriate:

Agnostic	<input type="checkbox"/>
Atheist	<input type="checkbox"/>
Bah'ai	<input type="checkbox"/>
Buddhist	<input type="checkbox"/>
Christian – Catholic	<input type="checkbox"/>
Christian – Protestant	<input type="checkbox"/>
Christian - Other	<input type="checkbox"/>
Hindu	<input type="checkbox"/>
Humanism	<input type="checkbox"/>
Jain	<input type="checkbox"/>
Jewish	<input type="checkbox"/>
Muslim	<input type="checkbox"/>

Pagan	<input type="checkbox"/>
Sikh	<input type="checkbox"/>
Rastafarian	<input type="checkbox"/>
Scientologist	<input type="checkbox"/>
Shinto	<input type="checkbox"/>
Zoroastrian	<input type="checkbox"/>
No religion or belief	<input type="checkbox"/>
Any Other	<input type="checkbox"/>