

## Equality and Diversity Monitoring Form

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The Council wants to meet the aims and commitments set out in its equality policy. This includes not discriminating under the Equality Act 2010, and building an accurate picture of the make-up of the workforce in encouraging equality and diversity.

The organisation needs your help and co-operation to enable it to do this, but filling in this form is voluntary.

This information you provide is confidential and will be used solely for monitoring purposes. We will treat all personal information in line with current data protection legislation and our data protection policy.

**Name:**

**Post applied for:**

### Eligibility to work in the UK:

1. Do you have the right to work in the UK?
- ☐ Yes
  - ☐ No

### Equal Opportunities:

2. How would you describe your national identity?
- ☐ British
  - ☐ English
  - ☐ Welsh
  - ☐ Scottish
  - ☐ Northern Irish
  - ☐ Other
  - ☐ Prefer not to say

### Ethnic Group:

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

3. What is your ethnic group?
- ☐ English, Welsh, Scottish, Northern Irish or British
  - ☐ Irish
  - ☐ Gypsy or Irish Traveller
  - ☐ Any other White background
  - ☐ White and Black Caribbean
  - ☐ White and Black African

- ☐ White and Asian
- ☐ Any other Mixed or Multiple background
- ☐ Indian
- ☐ Pakistani
- ☐ Bangladeshi
- ☐ Chinese
- ☐ Any other Asian or British Asian background
- ☐ Caribbean
- ☐ African background
- ☐ Any other Black, Black British, Caribbean background
- ☐ Arab
- ☐ Any other ethnic group
- ☐ Prefer not to say

**Marital Status:**

4. What is your legal marital or registered partnership status?
- ☐ Never married and never registered in a civil partnership
  - ☐ Married
  - ☐ In a registered civil partnership
  - ☐ Separated, but still legally married
  - ☐ Separated, but still legally in a civil partnership
  - ☐ Divorced
  - ☐ Formally in a civil partnership which is now legally dissolved
  - ☐ Surviving partner from a registered civil partnership
  - ☐ Prefer not to say

**Religion:**

5. What is your religion?
- ☐ No Religion
  - ☐ Christian (inc Church of England, Catholic, Protestant and all other Christian denominations)
  - ☐ Buddhist
  - ☐ Hindu
  - ☐ Jewish
  - ☐ Muslim
  - ☐ Sikh
  - ☐ Any other religion
  - ☐ Prefer not to say

**Disability:**

6. Do you consider yourself to have a disability or health condition?
- ☐ Yes
  - ☐ No
  - ☐ Prefer not to say

**Sexual Orientation:**

7. Which of the following best describes your sexual orientation?
- ☐ Straight/Heterosexual
  - ☐ Gay or Lesbian
  - ☐ Bisexual
  - ☐ Other sexual orientation
  - ☐ Prefer not to say

**Gender Identity:**

8. Is the gender you identify with the same as your sex registered at birth?
- ☐ Yes
  - ☐ No
  - ☐ Prefer not to say

**Gender:**

9. Check one option to reflect your gender?
- ☐ Female
  - ☐ Male
  - ☐ Intersex
  - ☐ Non-binary
  - ☐ Other
  - ☐ Prefer not to say

**Age:**

10. What is your age?
- ☐ 16-24
  - ☐ 25-29
  - ☐ 30-39
  - ☐ 40-49
  - ☐ 50-59
  - ☐ 60+
  - ☐ Prefer not to say

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Many thanks for taking the time to complete this form.