

**Equal Opportunities Monitoring Form**

|  |  |
| --- | --- |
| Position applied for: |  |

|  |
| --- |
| In accordance with its equal opportunities statement, the School 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.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 will 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. |

|  |
| --- |
| **RACE/NATIONALITY/ETHNIC ORIGIN** |
| White | English ⭘ | Scottish ⭘ | Welsh ⭘ | Irish ⭘ |
| British ⭘ | Other white background ⭘ (please specify) ………………………………………. |
| Mixed | White and Black Caribbean ⭘ | White and Black African ⭘ |
| White and Black British ⭘ | White and Asian ⭘ |
| Other mixed background ⭘ (please specify) …………………………………………………..…………………… |
| Asian  | Indian ⭘ | Pakistani ⭘ | Bangladeshi ⭘ | British ⭘ |
| Other Asian background ⭘ (please specify) ………………………………………………….…………………… |
| Black | Black Caribbean ⭘ | Black African ⭘ |
| Black British ⭘ | Other Black background ⭘ (please specify) …………………………………. |
| Chinese ⭘ |
| Other ethnic group ⭘ |
| Prefer not to say ⭘ |

|  |
| --- |
| **GENDER** |
| Male ⭘ | Female ⭘ | Prefer not to say ⭘ |

|  |
| --- |
| **MARITAL/CIVIL PARTNERSHIP STATUS** |
| Married ⭘ | Single ⭘ | Other ⭘ | Prefer not to say ⭘ |

|  |
| --- |
| **AGE BAND** |
| Under 18 ⭘ | 18–29 ⭘ | 30–39 ⭘ | 40–49 ⭘ |
| 50–59 ⭘ | 60–65 ⭘ | Over 65 ⭘ | Prefer not to say ⭘ |

|  |
| --- |
| **SEXUAL ORIENTATION** |
| Heterosexual ⭘ | Homosexual ⭘ | Bisexual ⭘ | Transsexual ⭘ |
| Prefer not to say ⭘ |

|  |
| --- |
| **DISABILITY** |
| None ⭘ | Physical disability ⭘ | Mental disability ⭘ | Prefer not to say ⭘ |

|  |
| --- |
| **RELIGION** |
| Buddhist ⭘ | Catholic ⭘ | Christian ⭘ | Hindu ⭘ |
| Jewish ⭘ | Muslim ⭘ | Rastafarian ⭘ | Sikh ⭘ |
| None ⭘ | Other ⭘ (please specify) ………………………..………………….……… | Prefer not to say ⭘ |

For the purposes of compliance for the *Data Protection Act 1998*, I hereby confirm that, by completing this form, I give my consent to the School processing the data supplied on this form for the purposes of equal opportunities monitoring.

Signed: ................................................................. Name: ...................................................................................

Date: ....................................................................