

## Diversity & Equal Opportunities Monitoring Form

To help us monitor our Equal Opportunities Policy please answer the following questions. **You are under no obligation to answer any of the questions.**

All information will be treated in the strictest confidence, in line with requirement of Data Protection Act 2018, and will not affect your application.

**Gender:**  Female  Male  Transgender

**Ethnic origin:** Please choose **ONE** section from A to E, then tick the appropriate box to indicate your cultural background:

### A White

- Scottish
- English
- Welsh
- Irish
- Polish
- Gypsy Traveller
- Other white

### B Mixed

- Any mixed background

### C Asian or Asian Scottish/British

- Indian
- Pakistani
- Bangladeshi
- Chinese
- Other Asian

### D Black or Black Scottish/British

- Caribbean
- African
- Other Black

### E Other Ethnic Group

- Arab, Arab/Scottish British
- Prefer not to say

Any other ethnic group: (please state) \_\_\_\_\_

**Disability:** Do you consider yourself to have a disability? By this we mean a condition which has a Long term and substantial effect on your ability to carry out normal day to day activities.

- Yes  No

If yes, is it

Physical  Mental Ill Health  Learning Disability

Visual Impairment  Hearing Impairment  Other  - please specify

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**Age:** Please indicate your age group:

- 16 – 24
- 25 – 34
- 35 – 44
- 45 – 54
- 55 – 64
- 65 and over

**Sexual Orientation:**

- Bi-sexual                       Gay/Lesbian             Heterosexual/Straight             Prefer not to say

**Religion:** I would describe my religious background/belief as: \_\_\_\_\_

- None     I prefer not to say