



Equal Opportunities Monitoring Form

CONFIDENTIAL

In accordance with its policy on equal opportunities in employment, Chance for Childhood will provide equal opportunities to any employee or job applicant and will not discriminate either directly or indirectly because of race, sex, sexual orientation, gender reassignment, religion or belief, marital or civil partnership status, age, disability, or pregnancy and maternity.

In order to assess how successful this policy is we have set up a system of monitoring all job applications. We would therefore be grateful if you would complete the questions on this form. We have asked for your name to enable us to monitor applications at shortlisting and appointment as well as application stage.

All information will be treated in confidence and will not be seen by staff directly involved in the appointment. The questionnaire will be kept separate from your application form and used only to provide statistics for monitoring purposes. Thank you for your assistance.

Name:

Position applied for:

Gender Man Woman Non-binary Prefer not to say

If you prefer to use your own term, please specify here:

Are you married or in a civil partnership? Yes No Prefer not to say

Age 16-24 25-29 30-34 35-39 40-44 45-49

50-54 55-59 60-64 65+ Prefer not to say

What is your ethnicity?

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

White

English Welsh Scottish Northern Irish Irish British

Gypsy or Irish Traveller Prefer not to say

Any other white background, please write in:

Mixed/multiple ethnic groups

White and Black Caribbean White and Black African White and Asian

Prefer not to say Any other mixed background, please write in:

Asian/Asian British

Indian Pakistani Bangladeshi Chinese Prefer not to say

Any other Asian background, please write in:

Black/ African/ Caribbean/ Black British

African Caribbean Prefer not to say

Any other Black/African/Caribbean background, please write in:

Other ethnic group

Arab Prefer not to say Any other ethnic group, please write in:

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

Yes No Prefer not to say

If YES, which of the following best describes your disability?

Visual (NOT including wearing glasses or contact lenses)

Co-ordination, dexterity or mobility

Mental Health

Learning difficulties

Speech

Hearing

Other physical or medical conditions – please specify:

What is your sexual orientation?

Heterosexual Gay woman/lesbian Gay man Bisexual

Prefer not to say If you prefer to use your own term, please specify

here:

What is your religion or belief?

No religion or belief

Buddhist

Christian

Hindu

Jewish

Muslim

Sikh

Prefer not to say

If other religion or belief, please write in:

Please return the completed form to hr@chanceforchildhood.org with your job application.

To learn more about what we do with your data, please visit www.chanceforchildhood.org/privacy. If you want to receive a paper copy of our Privacy policy, please call us on 01483 230 250 or email hr@chanceforchildhood.org.