

Equal Opportunities Monitoring Form



Personal information including gender, ethnicity and age is collected by NYCOS for monitoring purposes only and will not be used in any decisions affecting you. The responses that you do give will assist us greatly in our commitment to diversity and will be kept strictly confidential.

GENDER IDENTITY:

Male Female Non-binary Other Prefer not to say

If other, 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:

Scottish English Welsh Northern Irish
Irish British Gypsy or Irish Traveller Prefer not to say

Any other white background, please specify here:

Mixed/multiple ethnic groups:

White and Black Caribbean

White and Black African

White and Asian

Prefer not to say

Any other mixed background, please specify here:

Asian/Asian British:

Indian

Pakistani

Bangladeshi

Chinese

Prefer not to say

Any other Asian background, please specify here:

Black/ African/ Caribbean/ Black British:

African

Caribbean

Prefer not to say

Any other Black/African/Caribbean background, please specify here:

Other ethnic group:

Arab

Prefer not to say

Any other ethnic group, please specify here:

DO YOU CONSIDER YOURSELF TO HAVE A DISABILITY OR HEALTH CONDITION?

Yes

No

Prefer not to say

What is the effect or impact of your disability or health condition on your ability to give your best at work? Please specify below.

The information in this form is for monitoring purposes only. If you believe you need a 'reasonable adjustment', then please discuss this with your manager, or the manager running the recruitment process if you are a job applicant.

WHAT IS YOUR SEXUAL ORIENTATION?

Heterosexual Gay Lesbian Bisexual Prefer not to say

If you prefer to use your own term, please specify below.

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 specify here:

DO YOU HAVE CARING RESPONSIBILITIES? IF YES, PLEASE TICK ALL THAT APPLY

None

Primary carer of a child/children (under 18)

Primary carer of disabled child/children

Primary carer of disabled adult (18 and over)

Primary carer of older person

Secondary carer (another person carries out the main caring role)

Prefer not to say

PERSONAL DETAILS

This section of the form will be utilised as part of an anonymous short-listing process relating to the position you are applying for. Please ensure no personal or identifiable information is recorded on your other application documents.

Title:

Full Name:

Address:

Postcode: :

Contact Telephone Number:

Email address:

Date of Birth:

RIGHT TO WORK

I, the undersigned, declare I have legal Right to Work in the UK and will provide evidence suitable for a full check upon any offer of employment, or on request for any other purposes.

Signed: (Print or Sign Name in Full):

Date: