

EQUAL OPPORTUNITIES MONITORING FORM

The Aldenham Foundation wholeheartedly supports the principle of equal opportunities in employment; and actively opposes all forms of unlawful or unfair discrimination on the grounds of sex, marital or civil partner status, pregnancy or maternity, sexual orientation, gender reassignment, race (which includes colour, nationality and ethnic or national origins), religion or belief, age or disability.

This form is used for monitoring purposes only and assists us in monitoring who is applying for employment with us, our adherence to equal opportunities best practice and our progress towards identifying any barriers to diversity among our workforce in compliance with the requirements of the Equality Act 2010.

We would be grateful if you would complete this form and return it with your Application. You are not obliged to answer all the questions, but the more information you supply, the more effective our monitoring will be. The form will not be viewed until the recruitment process is complete and all information supplied will be treated in the strictest confidence. Thank you for your assistance.

Please complete in block capitals or typescript, ticking the boxes which most closely relate to you.

1. Please state the job you have applied for and the date of your application:

Job applied for:

Date of application:

2. Where did you hear about the job for which you have applied (please tick)?

School Website

Recruitment Website

Friend

Agency

Other (please specify):

3. What is your gender (please tick)?

Male

Other

Female

Prefer not to say

Non-binary

Please turn over

4. Is your age between (please tick)?

16-24	<input type="checkbox"/>	25-34	<input type="checkbox"/>	35-44	<input type="checkbox"/>
45-54	<input type="checkbox"/>	55-64	<input type="checkbox"/>	65 or over	<input type="checkbox"/>

5. How would you describe your nationality and/or ethnicity (please tick)?

White		Black/Black British		Chinese or other ethnic Group:	
British – English, Scottish or Welsh	<input type="checkbox"/>	Caribbean	<input type="checkbox"/>	Chinese:	<input type="checkbox"/>
Irish	<input type="checkbox"/>	African	<input type="checkbox"/>	Other	<input type="checkbox"/>
Any other white background	<input type="checkbox"/>	Any other Black background	<input type="checkbox"/>	Prefer not to say	<input type="checkbox"/>
Mixed race:		Asian/Asian British:			
White and Black Caribbean	<input type="checkbox"/>	Indian	<input type="checkbox"/>		
White and Black African	<input type="checkbox"/>	Pakistani	<input type="checkbox"/>		
White and Asian	<input type="checkbox"/>	Bangladeshi	<input type="checkbox"/>		
Any other mixed background	<input type="checkbox"/>	Any other Asian Background	<input type="checkbox"/>		

6. How would you describe your sexual orientation (please tick)?

Heterosexual	<input type="checkbox"/>	Bisexual	<input type="checkbox"/>	Lesbian	<input type="checkbox"/>
Gay	<input type="checkbox"/>	Other	<input type="checkbox"/>	Prefer not to say	<input type="checkbox"/>

7. Do you consider yourself to be disabled according to the definition below?

The Equality Act 2010 defines a person as having a disability if he/she has a physical or mental impairment that has a 'substantial' and 'long term' negative impact on his/her ability to undertake normal activities.

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Prefer not to say	<input type="checkbox"/>
-----	--------------------------	----	--------------------------	-------------------	--------------------------