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# EQUALITY AND DIVERSITY MONITORING FORM

We are committed to equal opportunities in our recruitment process and in order to find out how well we are doing with this we need to collect monitoring data. This monitoring form is voluntary but the information we collect here is very useful to us as it helps us to make sure that we are an inclusive organisation and to find out if our Council is diverse. The information you supply on this form will be kept confidentially. The monitoring form is not sent to BCCA members and has no part in the election process.

**Gender** Male 🗆 Female 🗆 Prefer not to say 🗆

**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 🗆 Black British 🗆

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:

**Disability**

The Equality Act 2010 defines a disabled person as someone who has a physical or mental impairment which has a substantial and long-term adverse effect on their ability to carry out normal day-to-day activities.

Do you consider yourself to be disabled?

[ ] Yes.

Please specify:

[ ]  No

**[ ]** Prefer not to say

**What is your sexual orientation?**

Heterosexual 🗆 Gay woman/lesbian 🗆 Gay man 🗆 Bisexual 🗆

Prefer not to say 🗆 If other, please write in:

**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:

🗆 Prefer not to say 🗆 If other, please write in:

**Please return this form along with your application to** **bcca@bcs.com**