# EQUALITY AND DIVERSITY MONITORING FORM

This information will be used by the school and Creative Education Trust for equality monitoring and statutory purposes (for example the school workforce census).

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **What is your gender?** | | | | | | | | | | | |
| Male | Female | | Prefer not to say | | | | | | | | |
| **Are you married or in a civil partnership?** | | | | | | | | | | | |
| Yes | No | | Prefer not to say | | | | | | | | |
| **Age** | | | | | | | | | | | |
| 16-25 | 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?** | | | | | | | | | | | |
| ***White*** | | | | | | | | | | | |
| English | Welsh | | Scottish | Northern Irish | | |  | Irish | | | British |
| Gypsy or Irish Traveller | | | Prefer not to say | | | | | | | | |
| Any other white background please state: Click or tap here to enter text. | | | | | | | | | | | |
| ***Mixed / multiple ethnic groups*** | | | | | | | | | | | |
| White and Black Caribbean | | | | White and Black African | | | | | | | |
| White and Asian | | Prefer not to say | |  | | | | | | | |
| Any other mixed background, please state: Click or tap here to enter text. | | | | | | | | | | | |
| ***Asian / Asian British*** | | | | | | | | | | | |
| Indian | Pakistani | | Bangladeshi | | Chinese | | | | Prefer not to say | | |
| Any other Asian background, please state: Click or tap here to enter text. | | | | | | | | | | | |
| ***Black / African/ Caribbean/ Black British*** | | | | | | | | | | | |
| African | Caribbean | | Prefer not to say | | | | | | | | |
| Any other Black/Africa/Caribbean background, please state: Click or tap here to enter text. | | | | | | | | | | | |
| ***Other ethnic group*** | | | | | | | | | | | |
| Arab | Prefer not to say | | | | | | | | | | |
| Any other ethnic group, please state: Click or tap here to enter text. | | | | | | | | | | | |
| **Do you consider yourself to have a disability?** | | | | | | | | | | | |
| Yes | No | | Prefer not to say | | | | | | | | |
| The information in this form is for monitoring purposes only. If you believe that you need a ‘reasonable adjustment’ then please highlight this on your application form. | | | | | | | | | | | |
| **What is your sexual orientation?** | | | | | | | | | | | |
| Heterosexual | | | Gay woman / lesbian | | | Gay man | | | | Bisexual | |
| Prefer not to say | | | If other, please state: Click or tap here to enter text. | | | | | | | | |
| **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 state: Click or tap here to enter text. | | | | | | | | | | | |