

Equal opportunities monitoring form

Box Hill School is committed to ensuring that applicants and employees from all sections of the community are treated equally and not discriminated against on the grounds of gender, colour, race, nationality, marital or civil partnership status, religion or belief, sexual orientation, disability or age.

This form 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. These objectives comply with the requirements of the Equality Act 2010.

We would be grateful if you would complete this form and return it with your completed Application Form. You are not obliged to answer all the questions but the more information you supply, the more effective our monitoring will be. The information you provide will be used solely for monitoring purposes. It will be kept securely and not opened until the recruitment process is complete. Thank you for your assistance.

When completing this form please tick the boxes which most closely relate to you.

1. Please state which 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?

Newspaper (please specify which one)

.....

School website Agency

Friend

Other (please specify)

.....

3. What is your gender (please tick)?

Male

Female

If you are currently undergoing the process of gender reassignment, please tick your future gender.

4. Date of Birth:

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

White:

British — English,
Scottish or Welsh

Caribbean

Chinese

Irish

African

Any other ethnic
group

Any other white
background

Any other Black
background

Mixed race:

White and Black
Caribbean

Indian

White and Black
African

Pakistani

White and Asian

Bangladeshi

Any other mixed
background

Any other Asian
background

Asian or Asian British:

Chinese or other ethnic group:

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

Heterosexual

Bisexual

Lesbian

Gay

Prefer not to say

7. How would you describe your religion (please tick)?

My religion is:.....

I am not religious

Prefer not to say

8. The Equality Act defines a disability as a "physical or mental impairment" which "has a substantial and long-term adverse effect on a person's ability to carry out normal day-to-day activities". An effect is long-term if it has lasted, or is likely to last, over 12 months or for the rest of the life of the person affected. Do you consider yourself to have a disability as defined under the Equality Act (please tick)?

Yes No

I used to have a disability but have now recovered

Don't know

9. If you answered "Yes" to question 8, please give brief details of your condition

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10. For the purposes of compliance with the Data Protection Act 1998, I hereby confirm that by completing this form I give my consent to Box Hill School processing the data supplied above in connection with monitoring compliance with its equal opportunities obligations and policy. I also agree to the storage of this information on manual and computerised files.

Signed

Dated