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| **At ACET we are committed to promoting equality and ensuring that minority groups are not excluded from our recruitment process. To help us to monitor the effectiveness of our equality practices, we need to gather equality data during our recruitment processes. Completion of this form is voluntary.****Please note: The information gathered in this form will not be seen by the shortlisting panel and will not be used for selection purposes. It is used for monitoring purposes only.** |

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| **POST/APPLICATION DETAILS** |
| **Position applied for:** |       |
| **Name of academy/job location:** |       |
| **Candidate Name:** |       |

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| **GENDER** |
| Male |[ ]  Female |[ ]  Prefer not to say |[ ]  Other (please specify) |       |

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| **AGE** |
| 16 – 24 |[ ]  25 – 34 |[ ]  35 – 44 |[ ]  45 – 54 |[ ]
| 55 – 64 |[ ]  65 + |[ ]  Prefer not to say | [ ]  |

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| **SEXUAL ORIENTATION** |
| Heterosexual  |[ ]  Gay |[ ]  Lesbian |[ ]  Bisexual |[ ]
| Asexual  |[ ]  Pansexual |[ ]  Undecided |[ ]  Prefer not to say |[ ]
| Other (please specify) |       |

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| **RELIGION OR BELIEF** |
| Buddhist |[ ]  Christian |[ ]  Hindu |[ ]  Jewish |[ ]
| Muslim |[ ]  Sikh |[ ]  No religion or belief  |[ ]
| Prefer not to say |[ ]  Other (please specify) |       |

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| **CARER RESPONSIBILITIES** |
| Do you have carer responsibilities?  | Yes |[ ]  No |[ ]  Prefer not to say |[ ]

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| **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 |[ ]  Gypsy or Irish Traveller |[ ]
| Northern Irish |[ ]  Irish |[ ]  British |[ ]  Prefer not to say |[ ]
| Any other white background (please specify) |       |
| **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) |       |
| **Asian/Asian British** |
| Indian |[ ]  Pakistani |[ ]  Bangladeshi |[ ]  Chinese |[ ]
| Prefer not to say |[ ]  Any other Asian background (please specify) |       |
| **Black/African/Caribbean/Black British** |
| African |[ ]  Caribbean |[ ]  Prefer not to say |[ ]
| Any other Black/African/Caribbean background (please specify) |       |
| **Other ethnic group** |
| Arab |[ ]  Prefer not to say |[ ]  Any other ethnic group, (please specify) |       |

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| **DISABILITY / HEALTH CONDITION** |
| Do you consider yourself to have a disability or health condition?  | Yes |[ ]  No |[ ]  Prefer not to say |[ ]
| What is the effect of your disability of health condition on your work? |
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| *Note: the information in this form is used for monitoring purposes only. If you believe you need a reasonable adjustment, please discuss this with HR.* |

*Thank you for completing this form. All information gathered is used for monitoring purposes only. Should there be anything you wish to discuss, please contact a member of the HR team.*