|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Monitoring Section** | | | | | | | | | | | | |
| **Post Applied for:** |  | | | | | | | **Post Reference** | | |  | |
| It would be really helpful if you could complete this section for us. The Academy is committed to equality of opportunity in employment and service delivery and the information you provide will help us to ensure fair and equal treatment of applicants and employees alike. The details you supply will be stored separately to the information on the rest of the application form and will not be used as a basis for decision-making within the selection process. | | | | | | | | | | | | |
| **1) How would you describe your ethnicity?** | | | | | | | | | | | | |
| (a) White  British  Irish  Any other White Background\* | | | | (b) Mixed  White and Black Caribbean  White and Black African  White and Asian  Any Other Mixed Background\* | | | | | (c) Asian & British Asian  Indian  Pakistani  Bangladeshi  Any other Asian Background\* | | | |
| (d) Black or Black British  Caribbean  African  Any other Black background\* | | | | (e) Chinese or other ethnic group  Chinese  Any other ethnic group\* | | | | | (f) Gypsy/Traveller  Irish Traveller  Romany Gypsy  Any other Background\* | | | |
| \*(please state)  Prefer not to state | | | | | | | | | | | | |
| **2) My sex is** | | | Male | | | | Female | | | | | Prefer not to state |
| **3) My date of birth is (DD/MM/YY):** | | | | | | | **Age:** | | | | |  |
| **4) The Equality Act 2010 defines disability as:**  'A physical or mental impairment which has a substantial and long term adverse effect on the ability to carry out normal day-to-day activities.' | | | | | | | | | | | | |
| I consider myself to be: | | Disabled | | | | Non Disabled | | | | | | Prefer not to say |
| **5) My religion is:** | | Buddhist | | | | Christian (all denominations) | | | | | | Hindu |
|  | | Jewish | | | | Muslim | | | | | | Sikh |
|  | | None | | | | Prefer not to state | | | | | | Other (please specify) |
|  | | | | | | | | | | | | |
| **6) My sexual Orientation is:** | | | | | | | | | | | | |
| Bi-Sexual | | | | | Gay | | | | | Lesbian | | |
| Hetrosexual | | | | | Transgender | | | | | Prefer not to state | | |
| Other (please specify) | | | | | | | | | | | | |
| **7) My Nationality is:** | | | | | | | | | | | | |