

# Recruitment Monitoring Form Strictly Confidential

Alleyne’s Academy is committed to ensuring that job applicants are treated fairly and consistently and that no one is disadvantaged or discriminated against.

Information collected via recruitment monitoring helps the Academy fulfil this commitment and assists greatly in the development and evaluation of employment policy.

Information you provide will be treated in strict confidence and will not be seen by anyone involved in the selection process.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Person/Role Details** | | | | |
| Full Name |  | | | |
| Job Title |  | | | |
| **Equal Opportunities** | | | | |
| As part of our equal opportunities policy we request that you complete the following information. This information is for monitoring purposes only. All information will be treated as confidential and will not be used when short-listing or deciding on whether an applicant is successful or unsuccessful in obtaining employment. The information you provide will help us to ensure that our recruitment procedures are fair by allowing us to identify and eliminate potential areas of discrimination. | | | | |
| **Please indicate your ethnic origin:** | | | | |
| **White** | | | | |
| English | |  | Welsh |  |
| Scottish | |  | Northern Irish |  |
| Irish | |  | British |  |
| Gypsy or Irish Traveller | |  | Prefer not to say |  |
| Other (Please state) | | | | |
| **Mixed/ multiple ethnic groups** | | | | |
| White & Black Caribbean | |  | White & Black African |  |
| White & Asian | |  | Prefer not to say |  |
| Other (Please state) | | | | |
| **Asian/ Asian British** | | | | |
| Indian | |  | Pakistani |  |
| Bangladeshi | |  | Chinese |  |
| Prefer not to say | |  |  |  |
| Other (Please state) | | | | |

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **Black/ African/ Caribbean/ Black British** | | | | | | | |
| African | |  | Caribbean | | |  | |
| Prefer not to say | |  |  | | |  | |
| Other (Please state) | | | | | | | |
| **Other Ethnic Group** | |  |  | | |  | |
| Arab | |  | Prefer not to say | | |  | |
| Other (Please state) | | | | | | | |
|  | | | | | | | |
| **Please indicate your Religion/Belief:** | | | | | | |
| Buddhist |  | | | Christian |  | |
| Hindu |  | | | Jewish |  | |
| Muslim |  | | | None |  | |
| Sikh |  | | | Prefer not to say |  | |
| Other (Please state) | | | | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| Please indicate your relevant Age Range: | | | |
| 16 – 17 |  | 18 – 24 |  |
| 25 – 29 |  | 30 – 39 |  |
| 40 – 49 |  | 50 – 59 |  |
| 60 – 64 |  | 65+ |  |
| Prefer not to say |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Please indicate your Sexual Orientation: | | | |
| Bisexual |  | Gay Man |  |
| Heterosexual |  | Lesbian/Gay woman |  |
| Prefer not to say |  |  |  |
| If you prefer to use your own term, please specify here | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| Please indicate your gender: | | | |
| Woman |  | Man |  |
| Non-binary |  | Prefer not to say |  |
| If you prefer to use your own term, please specify here | | | |

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| --- | --- | --- | --- |
| **Disability**  The Disability Discrimination Act (2010) defines a disabled person as someone with a ‘physical or mental impairment which has substantial and long-term adverse effect on his/her ability to carry out normal day to day activities’.  Do you consider yourself to have such a disability? | | | |
| Yes |  | No |  |
| Prefer not to say |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Please indicate what type of disability you have | | | |
| Do not wish to specify |  | Hearing Impairment |  |
| Learning Difficulties |  | Learning Disability |  |
| Long standing illness or health condition |  | Mental Health Condition |  |
| Mental illness |  | Mobility Impairment |  |
| Physical impairment |  | Physical Co-Ordination difficulties |  |
| Sensory impairment |  | Reduced physical capacity |  |
| Visual impairment (Not corrected by Spectacles or contact lenses) |  | Speech Impairment |  |
| Other |  | Neurological Condition |  |