Equality and Diversity Monitoring Form

The North West Coastal Forum wants to meet the aims and commitments set out in its equality policy. We need your help and co-operation to do this, but **completing this form is voluntary**.

Information provided will be kept confidential and be used only for monitoring purposes to build an accurate picture of the workforce in encouraging equality and diversity and to ensure we are not discriminating under the Equality Act 2010.

If you have any questions about the form contact the Chair of the North West Coastal Forum at info@nwcoastalforum.org.uk

Please return the completed form to info@nwcoastalforum.org.uk

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Sex and gender identity

What is your sex?

Female ☐ Male ☐ Prefer not to say ☐

Is the gender you identify with the same as your sex registered at birth?

Yes ☐ No ☐ Prefer not to say ☐

If the gender you identify with is not the same as your sex registered at birth, please write in:

Age 16-24 ☐ 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?

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

Asian or Asian British

Indian ☐ Pakistani ☐ Bangladeshi ☐ Chinese ☐ Prefer not to say ☐

Any other Asian background, please write in:

Black, African, Caribbean or Black British

African ☐ Caribbean ☐ Prefer not to say ☐

Any other Black, African or Caribbean background, please write in:

Mixed or Multiple ethnic groups

White and Black Caribbean ☐ White and Black African ☐ White and Asian ☐
Prefer not to say ☐

Any other Mixed or Multiple ethnic background, please write in:

White

English ☐ Welsh ☐ Scottish ☐ Northern Irish ☐ Irish ☐
British ☐ Gypsy or Irish Traveller ☐ Prefer not to say ☐

Any other White background, please write in:

Other ethnic group

Arab ☐ Prefer not to say ☐

Any other ethnic group, please write in:

Do you consider yourself to have a disability or health condition?

Yes ☐ No ☐ Prefer not to say ☐

What is the effect or impact of your disability or health condition on your work? Please write in here:

The information in this form is for monitoring purposes only. If you believe you need a 'reasonable adjustment', then please discuss this with your manager, or the manager running the recruitment process if you are a job applicant.

What is your sexual orientation?

Heterosexual ☐ Gay ☐ Lesbian ☐ Bisexual ☐ Asexual ☐

Pansexual ☐ Undecided ☐ Prefer not to say ☐

If you prefer to use your own identity, please write in:

What is your religion or belief?

No religion or belief ☐ Buddhist ☐ Christian ☐ Hindu ☐ Jewish ☐
Muslim ☐ Sikh ☐ Other ☐ Prefer not to say ☐

If other religion or belief, please write in:

What is your working pattern?

Full-time ☐ Part-time ☐ Prefer not to say ☐

What is your flexible working arrangement?

None ☐ Flexi-time ☐ Staggered hours ☐ Term-time hours ☐
Annualised hours ☐ Job-share ☐ Flexible shifts ☐ Compressed hours ☐
Homeworking ☐ Prefer not to say ☐ Other ☐

If other, please write in:

Do you have caring responsibilities? If yes, please tick all that apply

None ☐
Primary carer of a child/children (under 18) ☐
Primary carer of disabled child/children ☐
Primary carer of disabled adult (18 and over) ☐
Primary carer of older person ☐
Secondary carer (another person carries out the main caring role) ☐
Prefer not to say ☐