**Equal Opportunities Monitoring Questionnaire**

Guidance notes are on the reverse of this form

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| **NATIONAL INSURANCE NUMBER-** please specifiy:…………………………………………………………………….. |

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| **AGE-** Please enter your date of birth (dd/mm/yyyy):…………………………………………………..  (e.g. 05/08/1948) |

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| **SEX- I am:** Male Female |

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| **DISABILITY**  **I have: No disability**  **A physical impairment,** such as difficulty using arms or, mobility requiring a wheelchair or crutches  **A sensory impairment,** such as blind/visual impairment or deaf/hearing impairment  **A mental health condition,** such as depression or schizophrenia  **A learning disability,** such as Down’s syndrome, dyslexia or cognitive impairment such as autism  **A long standing illness,** such as cancer, HIV, diabetes, chronic heart disease or epilepsy.  **Other………………………………………………………………………………………………….** |

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| **MARITAL STATUS**  **I am:** Single (never married) Married (living with spouse) Married (separated)  Civil partnership (same sex)Divorced Widowed  Other………………………………………………………………………………… |

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| **RACE, COLOUR OR ETHNIC/NATIONAL ORIGINS**  **I am:** White Chinese Irish Traveller Indian Pakistani Bangladeshi  Black African Black Caribbean Black Other…………………………………………  Mixed Ethnic Group………………………………… Other………………………………………………… |

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| **NATIONALITY-** Please specify:……………………………………………………………………………………. |

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| **SEXUAL ORIENTATION-** My sexual orientation is towards:  **Persons of a different sex to me,** I am a heterosexual man or woman  **Persons of the same sex as me,** I am a gay man or lesbian  **Persons of both sexes,** I am a bisexual man or woman |

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| **ADVERTISING-** Please name any newspapers and/or websites where you learned of this job:  ……………………………………………………………………………………………………………………………………………………………. |

**GUIDANCE AND SUMMARY OF THE EQUAL OPPORTUNITIES POLICY**

Blackwater Integrated College is an Equal Opportunities Employer. It is our policy to provide equality of opportunity to all persons regardless of their sex, pregnancy or maternity related issues, race, age, sexual orientation, whether they are married or in a civil partnership, whether they are disabled, or whether they have undergone, are undergoing, or intend to undergo gender reassignment.

We do not discriminate on any of the grounds listed above.

In this questionnaire we are asking you to provide us with some personal information about yourself. We are doing this to demonstrate our commitment to promoting equality of opportunity in employment. The information which you provide will assist us in measuring and developing the effectiveness of our equal opportunities policy and to develop any affirmative action policies.

You are not obliged to answer the questions on this form and you will not suffer any penalty if you choose not to do so- please tick this box if that is your preference, so that we know not to send you a reminder questionnaire.

Access to this information will be strictly controlled and monitoring will involve the use of statistical summaries of information in which the identity of individuals will not appear.