

Equal opportunities monitoring form

Information provided by you on this form will be used to help monitor the SLG's equal opportunities policy and practices. The information is anonymous and does not form part of any selection process.

Post applied for:

Please state how you found out about the job:

**AGE**

What is your age?

□ 0-19 □ 20-34 □ 35-49 □ 50-64 □ 65+ □ Prefer not to say

**GENDER IDENTITY**

What do you consider your gender to be?

□ Female □ Male □ Non-binary □ Prefer not to say

□ Tick if your gender identity is different to the sex you were assumed to be at birth

**SEXUAL ORIENTATION**

What is your sexual orientation?

□ Bisexual □ Gay Man □ Gay Woman /Lesbian □ Heterosexual/Straight □ Prefer not to say

**ETHNIC GROUP**

What do you consider your ethnic group to be? (Mark one that best represents you)

□ Irish □ English/Welsh/Scottish/Northern Irish/British

□ Gypsy or Irish Traveller □ Any Other White background

□ White and Black Caribbean □ White and Black African

□ White and Asian □ Any Other Mixed background/Multiple ethnic

□ Caribbean □ African

□ Any Other Black background □ Indian

□ Pakistani □ Bangladeshi

□ Chinese □ Any Other Asian background

□ Arab □ Any other ethnic group

□ Prefer not to say

**DISABILITY**

Do you consider yourself to have a disability? (Mark one that best represents you)

□ Non-disabled □ Visual impairment

□ Hearing impairment/Deaf □ Physical disabilities

□ Mental health condition □ Cognitive or learning disabilities

□ Other long term/chronic conditions □ Prefer not to say