**Equal Opportunities Monitoring Form**

HfL Education is committed to providing equal opportunities and fair treatment for all job applicants. We collect employee equality information to help us make sure our policies and working practices are inclusive and non- discriminatory.

We also want to ensure we attract a wide range of people in our belief that a diverse workforce is more representative of our county’s children and young people and better tuned into delivering an excellent education for all, irrespective of where they live or their circumstances.

**Data Protection:** This information will only be used to monitor compliance with the law and best practice in terms of equal opportunity and non-discrimination. This document will be kept separate from your application form and the information provided will be treated in the strictest confidence and will not be taken into consideration during selection procedures.

**Post applied for** …………..…………………………………………………………..……… **School**:………………………………………………….

*Please tick the relevant boxes below:*

**What is your ethnic origin?** Please tick the appropriate box to indicate your ethnicity.

**White**

* British
* Scottish ☐ Welsh
* Irish
* Northern Irish

**Black, Black British, African, Caribbean**

* Caribbean ☐ African
* Other Black background
* **Other ethnic background**
* **I do not wish to state my ethnic origin**
* Prefer not to say
* 66+
* 61-65
* 51-60
* 41-50
* 31-40
* 22-30
* 16-21

**Age**

**Do you consider yourself to be disabled?** ☐ Yes ☐ No ☐ Prefer not to say

|  |  |  |
| --- | --- | --- |
| * Roma, Gypsy or Traveller |  | * Other White background |
| **Mixed**   * White and Black Caribbean |  | * White and Black African |
| * White and Asian |  | * Other Mixed background |
| **Asian, Asian British**   * Indian ☐ Pakistani | * Bangladeshi | * Chinese ☐ Other Asian background |

|  |  |  |
| --- | --- | --- |
| **What is your sexual orientation?**   * Heterosexual | * Homosexual | * Bisexual |
| * Asexual | * Pansexual | * Other |
| * Prefer not to say |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **What is your gender identity?** |  |  |  |
| * Female | * Male | * Non-binary | |
| * Agender | * Trans male | * Trans female | |
| * Other | * Prefer not to say | |  |
|  |  | |  |
| **What is your religion / belief?** |  |  |  |
| * Buddhist | * Christian | * Hindu | * Jewish |
| * Muslim | * Sikh | * No religion | * Other religion |
| * Prefer not to say | | | |
|  | | | |
| **What is your marital status?** |  |  |  |
| * Married | * Civil partnership | | * Divorced |
| * Single | * Widowed |  | * Separated |
| * Co-habiting | * Dissolved civil partnership | | * Prefer not to say |