

**Recruitment Equal Opportunity Monitoring Form**

The Equalities, Diversity and Inclusion Policy of Age UK Leeds states we will not discriminate against individuals on the grounds of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race (including colour, nationality and ethnic origin), religion or belief, gender, and sexual orientation. In order that we can measure the impact of this policy, and ensure our services meet the needs of all service users and clients, please tick the appropriate boxes. This information will be used for monitoring purposes only, for both Age UK Leeds and any funders of services. All details will be kept separate from any other personal details.

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| **Gender**  I identify my gender as:  Male Female  In another way  Prefer not to say:  If you describe your gender with a different term please provide this here: | | | | |
| |  | | --- | | **Sexual Orientation**  Heterosexual/straight  Bi/bisexual  Gay/Lesbian  Prefer not to say  If you prefer to use your own term please provide this here: |  |  | | --- | | **Trans Status: Do you consider yourself to be a trans person?**  **Yes**  **No**  **Prefer not to say**  *Trans is an umbrella term to describe people whose gender is not the same as the sex they were assigned at birth* | | | | | |
| **Age**  16 –24, 25-34, 35-44, 45-54, 55-65, 65-74, 75-84, 85-94, 95+ | | | | |
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| **Race/ Ethnicity** | | | | |
| White – British  White – Irish  White – other background  (please state) …………………  Indian  Pakistani  Bangladeshi  Chinese  Any other Asian background  (please state) …………………  Arab/Middle Eastern  Any other background (please state) ……………… |  | | White & Black Caribbean  White & Black African  White & Asian  Any other mixed background (please state)**……………………….**  Black Caribbean  Black African  Black British  Any other Black background  (please state) …………………...  Prefer not to say |  |
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| **Religion or belief**  Buddhist  Hindu  Christian  Jewish |  | Muslim  Sikh  Any other religion or belief  None  Prefer not to say | |  |
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| **Disability**  Do you consider yourself to be disabled? Yes  No  (This includes people with long term health conditions and specific learning difficulties such as dyslexia or dyspraxia) | | | | |
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