Equal Opportunities Monitoring Form

The purpose of this form is to help us monitor the effectiveness of our Equal Opportunities policy. This form does not constitute any part of the recruitment process.

We would be grateful if you would provide the information requested and return this form, together with your completed application form, to the address as shown within this application form. The information provided is totally confidential. Thank you for your help.

1. **How would you describe your Ethnic Origin**

**White Black or Black British Asian or Asian British**

ڤ British ڤ Caribbean ڤ Indian

ڤ Irish ڤ African ڤ Pakistani

ڤ Other White background ڤ Other Black background ڤ Bangladeshi

ڤ Other Asian background

**Mixed Other Ethnic Group**

ڤ White & Black Caribbean ڤ Chinese

ڤ White & Black African ڤ Vietnamese

ڤ White & Asian ڤ Other ethnic group

ڤ Other mixed background

1. **Gender Assignment**

Are you: ڤ Female ڤ Male

1. **Marital Status**

ڤSingle ڤMarried ڤSeparated ڤDivorced ڤLiving with a partner ڤ Civil Partnership

1. **Dependants**

Are you responsible for caring for dependants? ڤ Yes ڤ No

If Yes, please clarify: ڤ Children ڤ Adults ڤ Both

1. **Disabilities**

Do you consider yourself disabled ڤ Yes ڤ No

If Yes, please clarify: ڤ Disabled but not registered ڤ Registered disabled

1. **Age**

ڤ Under 20 ڤ 20-29 ڤ 30-39 ڤ 40-49 ڤ 50-59 ڤ 60 or over

**Thank you for taking the time to provide this information. Please return to:-**

Age UK North Craven

Cheapside

Settle

North Yorkshire, BD24 9EW

[jkerr@ageuknorthcraven.org.uk](mailto:jkerr@ageuknorthcraven.org.uk)

**Tel. 01729 823066**