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| **EQUALITIES MONITORING INFORMATION** |
| The completion of this form, or any part of it, is voluntary  **Age UK Waltham Forest** is committed to equality of opportunity, both in the provision of service and in our role as an employer. We believe that all people have the right to be treated with dignity and respect. We are committed to the elimination of unfair discrimination and we are determined to ensure that all service users receive fair and equitable treatment.  We would be grateful if you would complete the monitoring information below. The purpose of this information is to assist in monitoring fair and effective service delivery and to develop our policies and practices. The information will be treated and maintained confidentially and will be used for monitoring and to identify service improvements only. No personal information, such as your name or address, will be released when reporting statistical data.  **All information will be treated and maintained confidentially** |

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| **Age group:** *Please check X the appropriate box to indicate your age group* | | | |
| 18 -25 ☐ 26-35 ☐ 36-45 ☐ 46-55 ☐ 56-65 ☐ 66-75 ☐ 76+ ☐ 80+ ☐ | | | |
| **Ethnic group:** *Please check x the appropriate box to indicate your ethnic group* | | | |
| **White** | | **Mixed or Multiple ethnic groups** | |
|  | English, Welsh, Scottish, Northern Irish or British |  | White and Black Caribbean |
|  | Irish |  | White and Black African |
|  | Gypsy or Irish Traveller |  | White and Asian |
|  | Any other White background |  | Any other Mixed or Multiple ethnic background |
| Asian or Asian British | | Black, African, Caribbean or Black British | |
|  | Indian |  | African |
|  | Pakistani |  | Caribbean |
|  | Bangladeshi |  | Any other Black, African or Caribbean background |
|  | Chinese | Other ethnic group | |
|  | Any other Asian background |  | Arab |
|  | Any other ethnic group |
|  | Prefer not to say |

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| **Gender:** *Please check x the appropriate box to indicate how you would describe your gender* | | | |
|  | Male |  | I would describe my gender in another way |
|  | Female |  | Prefer not to say |

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| **Religion:** *Please check x the appropriate box to indicate your religion* | | | |
|  | No religion |  | Christian |
|  | Buddhist |  | Hindu |
|  | Jewish |  | Muslim |
|  | Sikh |  | Any other religion |
|  | Prefer not to say |  | |

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| **Sexual orientation:** *Please check x the appropriate box to indicate your sexual orientation.* | | | |
|  | Straight/Heterosexual |  | Bisexual |
|  | Gay or Lesbian |  | Other sexual orientation |
|  | Prefer not to say |  | |

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| **Disability:** Do you consider yourself to have a disability as defined in the Disability Discrimination Act 1995. The Act defines disability as: “a physical or mental impairment which has substantial and long-term effect on a person’s ability to carry out normal day to day activities”. | | | |
|  | Yes |  | Prefer not to say |
|  | No |  | |

**Thank you for completing this form.**

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