# Monitoring Form for Adults

## Reason form completed:       Month & Year:

|  |  |  |  |  |  |  |  |
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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** *Monitoring Ethnic Origin* Ethnic groups of over 1,000 people in Waltham Forest are named on this form. If your specific ethnic group is not listed, please choose the broad group and write in your ethnic group.  **What is your ethnic group?** *Please check x the appropriate box to indicate your ethnic group* | | | | | | | |
| **White** | | | | **Black or Black British** | | | |
|  | **British** | | |  | | African | |
|  | **Irish** | | |  | | Ghanaian | |
|  | Any other White background | | |  | | Kenyan | |
|  | Albanian | | |  | | Nigerian | |
|  | Greek/ Greek Cypriot | | |  | | Somali | |
|  | Kosovan | | |  | | South African | |
|  | Turkish/ Turkish Cypriot | | |  | |  | |
|  | (please specify below) | | |  | | **Caribbean** | |
|  |  | | |  | |  | |
|  |  | | |  | | **Any other Black background** | |
| **Dual or Multiple Heritage** | | | |  | | (please specify below) | |
|  | **White and Asian** | | |  | |  | |
|  | **White and Black African** | | |  | |  | |
|  | **White and Black Caribbean** | | |  | |  | |
|  | **Any other dual or multiple heritage** | | | **Asian or Asian British** | | | |
|  | (please specify below) | | |  | | **Bangladeshi** | |
|  |  | | |  | | Indian | |
|  |  | | |  | | **Pakistani** | |
| **Gypsy/Roma** | | | |  | |  | |
| **Traveller** | | | |  | |  | |
| **Chinese or Other Ethnic Group** | | | |  | | **Any other Asian background** | |
|  | **Chinese** | | |  | | Mauritian | |
|  | **Any other ethnic background** | | |  | | Sri Lankan | |
|  | (please specify below) | | |  | | (please specify below) | |
|  |  | | |  | |  | |
|  |  | | |  | |  | |
| *Monitoring 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 | | | | NO | | | |
| If ‘YES’ please identify which type of disability from the options below | | | | | | | |
| Hearing disability | | | | Learning disability | | | |
| Physical disability | | | | Visual disability | | | |
| Other please specify | | | | | | | |
| Do you have a mental health issue or are you a user of mental health services? | | | | | | | |
| YES | | | | NO | | | |
| *Monitoring Gender* | | | | | | | |
| What is your Gender Identity?*Please specify:* | | | | | | | |
| *Monitoring Age* | | | | | | | |
| Age (in years) | | | | | | | |
| My age is: 16-25; 26-35; 36-45; 46-55; 56-65; 66-75; 76-85; 86-95; 95+(please circle/type one group) | | | | | | | |
| *Monitoring Religion* Please check **x** one box | | | | | | | |
| What is your religion? *Please check x one box only* | | | | | | | |
| Buddhist | | Christian | Hindu | | Jewish | | Muslim |
| Sikh | | None | Other | | If “other” please specify: | | |
| *Monitoring* Sexual Orientation | | | | | | | |
| What is your Sexual Identity/Sexual Orientation?*Please specify:* | | | | | | | |