

Equal Opportunities Monitoring Form

Woldingham School is committed to ensuring that applicants and employees from all sections of the community are treated equally and not discriminated against on the grounds of gender, colour, race, nationality, marital or civil partnership status, religion or belief, sexual orientation, disability or age.

This form assists us in monitoring who is applying for employment with us, our adherence to equal opportunities best practice and our progress towards identifying any barriers to diversity among our workforce. These objectives comply with the requirements of the Equality Act 2010.

Please return this form in the separate envelope provided. This form is used solely for monitoring purposes. It will be kept securely and not opened until the recruitment process is complete.

We would be grateful if you would fill in this form and return it with your Application. You are not obliged to answer all the questions but the more information you supply, the more effective our monitoring will be. All information supplied will be treated in the strictest confidence. Thank you for your assistance.

Please complete in block capitals or typescript, ticking the boxes which most closely relate to you.

Please state which	h job	you	u have app	lied 1	or and the	date	of y	our application	
Job applied for									
Date of application									
Where did you h	ear a	bou	t the job fo	r wh	ich you ha	ve ap	plied	?	
Newspaper (please specify which one)									
School Website									
Agency									
Friend									
Other (please specify)									
		••	•			ently	unde	ergoing the process of gend	ler
reassignment, ple	ease t	ick y	your future	geno	ler.				
Male									
Female									
Is your age between	een (plea			r				
16-24			45-54						
25-34			55-64						
35-44			65 or over						
How would you describe your nationality and/or et					hnicit	y (pl			
White:			Black or Black British:					Chinese or other ethnic	
								group:	
British — English,			Caribbean					Chinese	
Scottish or Welsh									
Irish			African					Any other ethnic group	
Any other white			Any other Black backgrou			ınd			
background									
Mixed race:			Asian or Asian British:						
White and Black			Indian						
Caribbean									
White and Black			Pakistani						
African									
White and Asian			Bangladeshi						
Any other mixed			Any other Asian background						

background					
How would you descr	ibe	your sexual orientation (please	tick)	?	
Heterosexual		Bisexual		Lesbian	
Gay		Prefer not to say			
How would you descr	ibe	your religion (please tick)?			
My religion is:					
I am not religious					
Prefer not to say					
The Equality Act defi	nes	a disability as a "physical or n	nent	al impairment" which "has a	
_		n adverse effect on a person's a			
-		is long-term if it has lasted, or		•	
		the person affected. Do you co	nside	er yourself to have a disability	
	Equ	ality Act (please tick)?			
Yes					
No					
		I used to have a disability but have now recovered			
I do not know					
If you answered "Yes"	to c	question 8, please give brief deta	ils o	f your condition:	
ć					
• •			-	hereby confirm that by completing t	
give my consent to V	Volc	lingham School processing the	dat	ta supplied above in connection w	
ing compliance with its	s eq	ual opportunities obligations an	d po	olicy. I also agree to the storage of t	
tion on manual and cor	npu	terised files.			
	-				

form I monitor informat

Signea:			
Dated:			

For the