

Equal Opportunities Monitoring Form

The Shakespeare Hospice will ensure that any employee or job applicant will not receive less favourable treatment either directly or indirectly because of race, sex, sexual orientation, gender reassignment, religion or belief, marital or civil partnership status, age, disability, or pregnancy and maternity.

To comply with our policy on Equal Opportunities, we have set up a system of monitoring all job applications. We would therefore be grateful if you would complete the form and return with your completed application. The monitoring form will not be part of the interview process and will be treated in strict confidence. Upon receipt, the form will be detached from your application and stored separately until the HR Manager processes the data to monitor the diversity of applications we receive.

All information will be treated in confidence and will not be seen by staff directly involved in the recruitment and selection process.

Thank you for your assistance.

Post title:																																		
1. Gender:	<input type="checkbox"/> Male	<input type="checkbox"/> Female																																
2. Age	<input type="checkbox"/> 16 – 24	<input type="checkbox"/> 25 - 40	<input type="checkbox"/> 41 - 55	<input type="checkbox"/> 56 - 65	<input type="checkbox"/> 65 +																													
3. Marital status:	<input type="checkbox"/> Married	<input type="checkbox"/> Single	<input type="checkbox"/> Divorced	<input type="checkbox"/> Other																														
(Please specify																																		
4. Nationality:	<input style="width: 100%;" type="text"/>																																	
5. Do you have any disabilities?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>																													
6. How would you describe your ethnic origin?	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">White</td> <td></td> <td colspan="2">Black or black British</td> </tr> <tr> <td>A</td> <td>British</td> <td><input type="checkbox"/></td> <td>F</td> <td>Caribbean</td> <td><input type="checkbox"/></td> </tr> <tr> <td>B</td> <td>Any other white background</td> <td><input type="checkbox"/></td> <td>G</td> <td>African</td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Asian or Asian British</td> <td colspan="3">Other ethnic groups</td> </tr> <tr> <td>C</td> <td>Indian</td> <td><input type="checkbox"/></td> <td>H</td> <td>Chinese</td> <td><input type="checkbox"/></td> </tr> </table>					White			Black or black British		A	British	<input type="checkbox"/>	F	Caribbean	<input type="checkbox"/>	B	Any other white background	<input type="checkbox"/>	G	African	<input type="checkbox"/>	Asian or Asian British			Other ethnic groups			C	Indian	<input type="checkbox"/>	H	Chinese	<input type="checkbox"/>
White			Black or black British																															
A	British	<input type="checkbox"/>	F	Caribbean	<input type="checkbox"/>																													
B	Any other white background	<input type="checkbox"/>	G	African	<input type="checkbox"/>																													
Asian or Asian British			Other ethnic groups																															
C	Indian	<input type="checkbox"/>	H	Chinese	<input type="checkbox"/>																													

D	Pakistani	<input type="checkbox"/>		I	Other ethnic groups	<input type="checkbox"/>
E	Bangladeshi	<input type="checkbox"/>			Please specify	

7. Disability is defined by the Disability Discrimination Act as:

A physical or mental impairment, which has a substantial and long-term adverse effect on a person's ability to carry out normal day-to-day activities. The disability could be physical, sensory or mental and must be expected to last at least 12 months.

Are you a disabled person as defined by the Disability Discrimination Act?
Yes No

8. How would you describe your religion or belief?

- Christian Buddhist Hindu Jewish
 Muslim Sikh None Prefer not to say
 Other (please specify

9. What of the following describes your sexual orientation?

- Bi-sexual Gay Heterosexual Lesbian
 Other Prefer not to disclose

10. Where did you learn of this post? NHS Job Website Hospice Website
Stratford Herald
Observer Group Hospice UK Coventry Evening Telegraph

Thank you for completing this form. Please return it with your application.

Data Protection:

Information from this monitoring form will be used for the purposes for which it was requested and no other reason. The monitoring form will be stored, maintained and processed in accordance with the Data Protection Act 1998. The form will be shredded within six months of receipt.