# Stormont School

Equal Opportunities Monitoring Form

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| **Position Applied for** |  |

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| This form will be kept separately from your application and will be used solely for monitoring purposes.  You are not obliged to complete this form, but it is helpful to the School in maintaining equal opportunities. All information provided will be treated in confidence.  Stormont School is committed to ensuring applicants and employees from all sections of the community are treated equally. In accordance with the Equality Act 2010, the following protected characteristics are recognised and respected: age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex and sexual orientation. |

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| **Ethnicity** (please complete this part of the form as you feel is most appropriate for you) | | | | |
| **White:** | **British** | □ | **Any other white background \*** | □ |
| **Mixed:** | **White and Black Caribbean** | □ | **White and Black African** | □ |
| **White and Asian** | □ | **Any other mixed background \*** | □ |
| **Black or Black British:** | **Caribbean** | □ | **African** | □ |
| **Any other Black background \*** | □ |  |  |
| **Asian or Asian British:** | **Indian** | □ | **Pakistani** | □ |
| **Bangladeshi** | □ | **Any other Asian background \*** | □ |
| **Chinese or other Ethnic Group:** | **Chinese** | □ | **Other Ethnic Group \*** | □ |
| (\*please specify) |  | | | |

If you wish, you may disclose information about yourself in this section.

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| **Gender**  (please circle) | | MALE | | FEMALE | OTHER | | PREFER NOT TO SAY |
| **Do you consider yourself to have a disability?** (please circle) | | | | YES\* | NO | | PREFER NOT TO SAY |
| (\* please state nature of disability) | | | | | | | |
| The Equality Act defines disability as:  "A physical or mental impairment which has a substantial and long-term effect on a person's ability to carry out normal day-to-day activities" | | | | | | | |
| **Religion** |  | | **Sexual orientation** | | |  | |