

**MONITORING FORM – DIVERSITY**

The information will be used for statistical purposes only

|  |  |
| --- | --- |
| Surname |  |
|  |  |
| Forename(s) |  |

1. ***Gender***

|  |  |
| --- | --- |
| Male |  |
|  |  |
| Female |  |
|  |  |
| Self-description |  |
|  |  |
| I prefer not to say |  |

I prefer to describe myself as:

|  |
| --- |
|  |

1. ***Disability***

Do you consider yourself disabled?

|  |  |
| --- | --- |
| No |  |
|  |  |
| Yes |  |
|  |  |
| I prefer not to say |  |

If “Yes”, how would you describe your disability?

|  |
| --- |
|  |

1. ***Ethnicity***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Asian/Asian British** |  |  | **Black African/Caribbean/Black British** |  |
| Bangladeshi |  |  | African |  |
|  |  |  |  |  |
| Chinese |  |  | Caribbean |  |
|  |  |  |  |  |
| Indian |  |  | Other black origin |  |
|  |  |  |  |  |
| Pakistani |  |  | (please describe) |  |
|  |  |  |  |  |
| Other Asian origin |  |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| (please describe)   |  |  | | --- | --- | | **Mixed ethnic** |  | | White and black African |  | |  |  | | White and Asian |  | |  |  | | White and black Caribbean |  | |  |  | | Other mixed ethnic |  | |  |  | | (please describe)  **Other ethnic group** |  | | Arab | | |  | |  | | |  | | Any other ethnic group | | |  |   (please describe)  ----------------------------------------------- |  |  | |  |  | | --- | --- | | **White** |  | | English/Welsh/Scottish/N. Irish/British |  | |  |  | | Irish |  | |  |  | | Gypsy or Irish Traveller |  | |  |  | | Other white |  | |  |  | | (please describe)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | |  |
| **I prefer not to say** |  |  |  |  |

1. ***Age***

Please tick the age band you fall into:

|  |  |
| --- | --- |
| 16-24 |  |
|  |  |
| 25-34 |  |
| 35-44 |  |
|  |  |
| 45-54 |  |
|  |  |
| 55-64 |  |
|  |  |
| 65-74 |  |
|  |  |
| 75-84 |  |
|  |  |
| 85 or over |  |
|  |  |
| I prefer not to say |  |

1. ***Sexual orientation***

What is your sexual orientation?

|  |  |
| --- | --- |
| Bisexual |  |
|  |  |
| Gay or lesbian |  |
|  |  |
| Heterosexual |  |
|  |  |
| Other |  |
|  |  |
| I prefer not to say |  |

1. ***Religion or belief***

|  |  |
| --- | --- |
| Buddhist |  |
|  |  |
| Christian |  |
|  |  |
| Hindu |  |
|  |  |
| Jewish |  |
|  |  |
| Muslim |  |
|  |  |
| Sikh |  |
|  |  |
| Other |  |
|  |  |
| No Religion or Atheist |  |
|  |  |
| I prefer not to say |  |