At Tomorrow’s Warriors we celebrate diversity in all its forms and are proud to be an equal opportunities employer. As such we ask all candidates to complete and return this Equal Opportunities Monitoring Form.

**THIS INFORMATION WILL HAVE NO IMPACT ON THE FINAL RECRUITMENT DECISION.**

The data gathered will help us to monitor the effectiveness of our equal opportunities policies and procedures. It should be completed anonymously and will be processed separately from your application and held in the strictest confidence. THANK YOU.

|  |  |
| --- | --- |
| Position applied for |  |

In each section listed below, please choose one option by marking ‘X’ in the appropriate box.

**AGE**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 16-24 |  | 25 -29 |  | 30-34 |  | 35-39 |  | 40-44 |  |
| 45-49 |  | 50-54 |  | 55-59 |  | 60-65 |  | Prefer not to say |  |

**GENDER**

|  |  |  |  |
| --- | --- | --- | --- |
| Male |  | Female |  |
| Prefer to use own definition (please specify) | |  | |
| Prefer not to say |  |

**DO YOU HAVE AN AUTISTIC SPECTRUM CONDITION?**

|  |  |  |
| --- | --- | --- |
| No | |  |
| Yes | |  |
| Prefer to use own definition (please specify) |  | |
| Prefer not to say | |  |

**DISABILITY**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| The Equality Act 2010 defines a disability as a physical or mental impairment that has a substantial and long-term adverse on an individual’s ability to carry out normal day-to-day activities.  Do you consider that you have a disability? | | | | | |
| Yes |  | No |  | Prefer not to say |  |

**MARITAL OR CIVIL PARTNERSHIP STATUS**

|  |  |  |  |
| --- | --- | --- | --- |
| Married |  | In a registered civil partnership |  |
| Not married / in a civil partnership |  | Separated |  |
| Divorced |  | Widowed |  |
| Prefer not to say | | |  |

**Please continue on next page…**

**ETHNIC GROUP**

|  |  |  |  |
| --- | --- | --- | --- |
| **Asian / Asian British** | | **Black / Black British** | |
| Bangladeshi |  | African |  |
| Chinese |  | Caribbean |  |
| Indian |  |  |  |
| Pakistani |  |  |  |
| Other Asian background (please specify) |  | Other Black background (please specify) |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Mixed Ethnic Group** | | **White** | |
| White and Asian |  | White British |  |
| White and Black African |  | White Irish |  |
| White and Black Caribbean |  |  |  |
| Other Mixed background (please specify) |  | Other White background (please specify) |  |

|  |  |
| --- | --- |
| **Other Ethnic Group** (please specify) |  |

|  |  |
| --- | --- |
| Prefer not to say |  |

**SEXUAL ORIENTATION**

|  |  |  |  |
| --- | --- | --- | --- |
| Bisexual |  | Homosexual / Gay / Lesbian |  |
| Heterosexual |  | Prefer not to say |  |

**RELIGION OR BELIEF**

|  |  |  |  |
| --- | --- | --- | --- |
| Buddhist |  | Christian |  |
| Hindu |  | Jewish |  |
| Muslim |  | No religion |  |
| Sikh |  | Prefer not to say |  |
| Other religion or belief (please specify) | | |  |

|  |  |
| --- | --- |
| Date |  |

**Please do not sign this form. Thank you.**