



### Equality and Diversity Monitoring Form

Please answer each question in turn by choosing one option only, unless otherwise indicated. If you do not wish to answer the question, please choose the option "Prefer not to say" rather than leaving the question blank.

#### About you

##### Age

From the list of age bands below, please indicate the category that includes your current age in years:

16 - 24	
25 - 34	
35 - 44	
45 - 54	
55 - 64	
65+	
Prefer not to say	

##### Sex

What is your sex?

Male	
Female	
Prefer not to say	

##### Gender Identity

This following question is designed to gather trans data i.e., whether your gender identity and/or gender expression differs from your birth sex. A trans person may or may not seek to undergo gender reassignment hormonal treatment/surgery. Is the gender you identify with the same as your sex registered at birth? If no, please enter gender identity.

Yes	
No	
Prefer not to say	

##### Disability

The Equality Act 2010 generally defines a disabled person as someone who has a mental or physical impairment that has a substantial and long-term adverse effect on the person's ability to carry out normal day-to-day activities.



(a) Do you consider yourself to have a disability according to the definition in the Equality Act?

Yes	
No	
Prefer not to say	

(b) Are your day-to-day activities limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months?

Yes, limited a lot	
Yes, limited a little	
No	
Prefer not to say	

**Ethnic group**

What is your ethnic group?

Asian / Asian British

Bangladeshi	
Chinese	
Indian	
Pakistani	
Any other Asian background (write in)	

Black / African / Caribbean / Black British

African	
Caribbean	
Any other Black / Caribbean / Black British (write in)	

Mixed / multiple ethnic groups

White and Asian	
White and Black African	
White and Black Caribbean	
White and Chinese	
Any other Mixed / multiple ethnic background (write in)	

White



British / English / Welsh / Northern Irish / Scottish	
Irish	
Gypsy or Irish Traveller	
Any other White background (write in)	

Other ethnic group

Arab	
Any other ethnic group (write in)	

Prefer not to say

Prefer not to say	
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### Religion or belief

What is your religion or belief?

No religion or belief	
Buddhist	
Christian (all denominations)	
Hindu	
Jewish	
Muslim	
Sikh	
Any other religion (write in)	
Prefer not to say	

### Sexual orientation

What is your sexual orientation?

Bisexual	
Gay man	
Gay woman/lesbian	
Heterosexual/straight	
Other	
Prefer not to say	



### Socio-economic background

- (a) If you went to university (to study a BA, BSc course or higher) were you part of the first generation of your family to do so?

Yes	
No	
Did not attend University	
Prefer not to say	

- (b) Did you mainly attend a state or fee-paying school between the ages 11 – 18?

UK State School	
UK Independent/Fee-paying School	
Attended school outside the UK	
Prefer not to say	

### Caring responsibilities

- (a) Are you a primary carer for a child or children under 18?

Yes	
No	
Prefer not to say	

- (b) Do you look after, or give any help or support to family members, friends, neighbours, or others because of either:

- Long-term physical or mental ill-health / disability
- Problems related to old age?

(Do not count anything you do as part of your paid employment)

No	
Yes, 1 - 19 hours a week	
Yes, 20 - 49 hours a week	
Yes, 50 or more hours a week	
Prefer not to say	

**Thank you for completing this questionnaire**