**EQUAL OPPORTUNITIES MONITORING FORM**

Kala Sangam operates a policy of equal opportunities and wishes to ensure that all applicants are considered solely on their merits. This form is designed to ensure that the Equal Opportunities Policy is effectively implemented and enable us to check that all decisions are not influenced by unfair or unlawful discrimination. To help us to do this, we ask that all applicants for employment complete this form. The information is strictly confidential and will be used for monitoring the Policy only. It will not be available to anyone involved in considering an application.

**What is your ethnic origin?**

WHITE [ ]  English/ Welsh/ Scottish/ Northern Irish/ British

[ ]  White Irish

[ ]  Gypsy or Irish Traveller

[ ]  Other White background – please specify:

ASIAN or ASIAN BRITISH [ ]  Indian

[ ]  Pakistani

[ ]  Bangladeshi

[ ]  Chinese

[ ]  Other Asian background – please specify:

BLACK OR BLACK BRITISH [ ]  African

[ ]  Caribbean

[ ]  Other Black background – please specify:

MIXED [ ]  White and Black Caribbean

[ ]  White and Black African

[ ]  White and Asian

[ ]  Other Mixed / Multiple Ethnic – please specify:

OTHER [ ]  Arab

[ ]  Other – please specify:

**What is your gender?**

[ ]  Female [ ]  Male [ ]  Non-Binary [ ]  Prefer not to say

**Is your gender different from the sex you were assigned at birth?**

[ ]  Yes [ ]  No [ ]  Prefer not to say

**Do you consider yourself to have a disability, long term illness or health condition that might affect your ability to carry out normal daily activities on an equal basis with others?**

[ ]  No [ ]  Visual Impairment / Deaf [ ]  Physical disabilities

[ ]  Cognitive or Learning disabilities [ ]  Mental Health condition

[ ]  Other long-term, chronic conditions [ ]  Prefer not to say

**How would you describe your sexual orientation?**

[ ]  Bisexual [ ]  Gay Man [ ]  Gay Woman/Lesbian [ ]  Heterosexual/Straight

[ ]  Prefer not to say

**What is your religion or belief?**

[ ]  No religion or belief

[ ]  Christian [ ]  Muslim [ ]  Buddhist [ ]  Hindu [ ]  Jewish [ ]  Sikh

[ ]  Other – please specify

[ ]  Prefer not to say

**What is your Martial Status?**

[ ]  Single [ ]  Married [ ]  Separated [ ]  Divorced [ ]  Widowed

[ ]  Prefer not to say

**Are you related to any Member of the Board or Staff of Kala Sangam?**

[ ]  YES [ ]  NO

If yes, please give the name(s) and state the relationship.

**Name:**  **Relationship:**

**HOW DID YOU FIND OUT ABOUT THIS POST?**