**EQUAL OPPORTUNITIES MONITORING FORM**

To monitor the effective delivery of The Poetry School’s commitment to equal opportunities, we require all applicants to complete the monitoring form below.

This form is used for monitoring purposes only and will not be considered with your application. Please do not put your name on the form anywhere.

**Date:**

1. Gender: Male Female

2. Date of birth:

3. Marital status: Married / Civil Partnership Single Divorced

 Other (Please specify …………………………)

4. Nationality:

5. How would you describe your ethnic origin?

|  |  |  |
| --- | --- | --- |
| **White** |  | **Black/ African/** **Caribbean/ Black** **British** |
| **A** | British |  |  | **M** | Caribbean |  |
| **B** | Irish |  |  | **N** | African |  |
| **C** | Any other white background |  |  | **P** | Any other black background |  |
| **Mixed / Multiple Ethnic Groups** |  | **Other ethnic groups** |
| **D** | White and black Caribbean |  |  | **R** | Chinese |  |
| **E** | White and black African |  |  | **S** | Other ethnic groups |  |
| **F** | White and Asian |  |  |  |  Please specify …………………………….. |  |
| **G** | Other mixed background |  |  | **Z** | Not stated |  |
| **Asian / Asian British** |  |  |
| **H** | Indian |  |  |  |  |  |
| **J** | Pakistani |  |  |  |  |  |
| **K** | Bangladeshi |  |  |  |  |  |
| **L** | Other Asian background |  |  |  |  |  |
|  | Please specify …………………………… |  |  |  |  |  |

6. Disability is defined by the Disability Discrimination Act as;

A physical or mental impairment, which has a substantial and long-term adverse effect on a person’s ability to carry out normal day-to-day activities. The disability could be physical, sensory or mental and must be expected to last at least 12 months.

**Are you a disabled person as defined by the Disability Discrimination Act?**  Yes No

7. What of the following describes your sexual orientation?

 Bi-sexual Gay man Heterosexual/straight Gay woman/lesbian

 Other Prefer not to disclose

8. How would you describe your religion or belief?

 Christian Buddhist Hindu Jewish

 Muslim Sikh None Prefer not to say

 Other (please specify ……………………………………………………………………)

*Thank you for completing this form. Please return it with your contract.*