

# Equality and diversity monitoring form – strictly confidential

Equality is a necessary goal if we want a society in which everyone is treated fairly, regardless of difference, and given the opportunity to fulfil their potential in life. SFC attaches importance to equality and diversity and where possible work to create an environment that provides equality of opportunity for all individuals.

We would be grateful if you would complete this form and return it with your

application. This information will help us to monitor the implementation and effectiveness of our Equality and Diversity Policy.

The information will not be used as part of the selection process itself and will be

held in compliance with the UK General Data Protection Regulation (UK GDPR) and the Data Protection Act 2018. The information contained in this form will be used solely for statistical purposes. For further information please view our [Job Applicant Privacy Notice](http://www.sfc.ac.uk/about-sfc/how-we-operate/access-information/privacy-notice/job-applicants.aspx).

| **Basic details** | **Response** |
| --- | --- |
| Name |  |
| Post applied for |  |

| **How did you hear about this post?** | **Response** |
| --- | --- |
| SFC Website |  |
| SFC E-mail |  |
| Internal Advert |  |
| Word of Mouth |  |
| SFC Member of Staff |  |
| Online |  |
| If “Online” please share website |  |
| Other advert |  |
| If “Other advert” please state |  |
| Other |  |
| If “Other”, specify if you wish |  |

| **What is your age?** | **Response** |
| --- | --- |
| 16-24 |  |
| 25-34 |  |
| 35-44 |  |
| 45-54 |  |
| 55-64 |  |
| 65+ |  |

| **What is your gender?** | **Response** |
| --- | --- |
| Male |  |
| Female |  |
| Prefer not to say |  |

| **Is your gender identity different to the sex you were assumed to be at birth?** | **Response** |
| --- | --- |
| Yes |  |
| If “Yes”, specify if you wish: |  |
| No |  |
| Prefer not to say |  |

| **Have you ever identified as a transgender or trans person?** | **Response** |
| --- | --- |
| Yes |  |
| No |  |
| Prefer not to say |  |

| **Do you consider yourself to be within any of the following categories? (you can select more than one if you wish)** | **Response** |
| --- | --- |
| Female-to-male / trans man |  |
| Male-to-female / trans woman |  |
| Intersex person |  |
| Non-binary gender person |  |
| Cross dressing / transvestite person |  |
| Other type of gender variant person |  |
| If “Other”, specify if you wish |  |
| Prefer not to say |  |

| **What is your race / ethnic group?** | **Response** |
| --- | --- |
| *Indicate the box that best describes your ethnic group or background* |  |
| **A)** | **White** |
| Scottish |  |
| Other British |  |
| Irish |  |
| Gypsy/Traveller |  |
| Polish |  |
| Other white ethnic group (please specify) |  |
| **B)** | **Mixed or Multiple Ethnic Groups** |
| Any mixed/multiple ethnic groups (please state) |  |
| **C)** | **Asian, Asian Scottish or Asian British** |
| Pakistani, Pakistani Scottish or Pakistani British |  |
| Indian, Indian Scottish or Indian British |  |
| Bangladeshi, Bangladeshi Scottish or Bangladeshi British |  |
| Chinese, Chinese Scottish or Chinese British |  |
| Other (please state) |  |
| **D)** | **African** |
| African, African Scottish or African British |  |
| **E)** | **Caribbean or Black** |
| Caribbean, Caribbean Scottish or Caribbean British |  |
| Black, Black Scottish or Black British |  |
| Other (please write in) |  |
| **F)** | **Other ethnic group** |
| Arab, Arab Scottish or Arab British |  |
| Other (please state) |  |
| **G)** | **Prefer not to say** |
| Prefer not to say |  |

| **What religion, religious denomination or body do you belong to?** | **Response** |
| --- | --- |
| None |  |
| Christian: Church of Scotland |  |
| Christian: Roman Catholic |  |
| Christian: Other Christian (please specify) |  |
| Muslim |  |
| Buddhist |  |
| Sikh |  |
| Jewish |  |
| Hindu |  |
| Another religion or body (please specify) |  |
| Prefer not to say |  |

| **How would you describe your sexual orientation?** | **Response** |
| --- | --- |
| Bisexual |  |
| Gay man |  |
| Gay woman / Lesbian |  |
| Heterosexual / straight |  |
| Not sure |  |
| Other (please specify) |  |
| Prefer not to say |  |

| **What is your legal marital or same sex partnership status?** | **Response** |
| --- | --- |
| Single |  |
| Married / Civil Partnership |  |
| Separated |  |
| Divorced / dissolved Civil Partnership |  |
| Co-habiting / in a relationship |  |
| Widowed / surviving partner from Civil Partnership |  |
| Prefer not to say |  |

| **Do you have caring responsibilities?**  **(please select all that apply)** | **Response** |
| --- | --- |
| None |  |
| Primary carer disabled adult (18 and over) |  |
| Primary carer of a child / children (under 18) |  |
| Primary carer of an older person (65 and over) |  |
| Primary carer of a disabled child / children |  |
| Secondary carer |  |
| Prefer not to say |  |

| **Do you have a disability?** | **Response** |
| --- | --- |
| I have a disability |  |
| I have no disability |  |
| Prefer not to say |  |

Thank you for taking the time to complete this form.