Sydenham Arts internal reference:

# EQUAL OPPORTUNITIES MONITORING FORM

Please return this form alongside your application to: james.hodgson@sydenhamarts.co.uk

### Statement of policy

Sydenham Arts strives to promote Equal Opportunities and we encourage applications from all sections of the community. Applicants are encouraged to complete this form as part of the recruitment package. We aim to ensure that no job applicant or employee receives less favourable treatment on the ground of race, colour, nationality, ethnic or national origins, religion or belief, age, gender, gender reassignment, maternity, marital status, sexual orientation or disability.

### Monitoring

In order to ensure the continued development of the above policy, all applicants are asked to complete the information below. You are not obliged to answer all questions, but obviously the more information you supply the more effective our monitoring will be. If you choose not to answer questions it will not affect your application. The information you supply here is confidential and will be used solely for monitoring purposes. The selection panel will not see this form.

**Post applied for:** Click here to enter text.

|  |  |
| --- | --- |
| Tick the appropriate box to indicate your ethnic background | [ ]  Asian Indian [ ]  Asian Bangladeshi[ ]  Asian Pakistani[ ]  Asian Other Click here to enter text.[ ]  Black Caribbean[ ]  Black African[ ]  Black Other Click here to enter text.[ ]  Chinese[ ]  Mixed: White and Black Caribbean [ ]  Mixed: White and Black African[ ]  Mixed: White and Asian[ ]  Mixed: Other Click here to enter text.[ ]  White[ ]  Any other, please write in: Click here to enter text. |

**Nationality:**

Click here to enter text.

**What is your sexual orientation?**

[ ] Bisexual

[ ]  Gay/Lesbian

[ ]  Heterosexual

[ ]  Prefer not to say

[ ] Other/Prefer to self-describe: Click here to enter text.

**What best describes your gender?**

[ ] Female

[ ]  Male

[ ]  Prefer not to say

[ ]  Other/Prefer to self-describe: Click here to enter text.

**Religion/Belief (**type your answer**):**

**Age group**:

[ ]  Under 25

[ ]  26 - 40

[ ]  41 - 60

[ ]  61 Over

**I consider myself to have a disability:**

[ ]  Yes

[ ]  No