Job title Job No School Name / Department Name

Please insert details



Application for Employment Equal Opportunities Monitoring

Please return this form by e-mail with your application form to XXXX@XXXX
Guidance when completing the Equal Opportunities Monitoring Form

 Use the following link to a booklet independently produced to give you 10 reasons why you should complete this form at:- www.stonewall.org.uk/at home/3460.asp

The information that you provide as an applicant is **confidential** and will only be used to produce statistics for equality and recruitment monitoring only, and will not be shared with the Recruitment Panel.

Please ensure you have completed the Job Title, Job Number and School Name or Department Name where applicable.

Completing this form and providing as much information as possible will help us to:-

- Monitor our progress around equality and diversity representation within our workforce.
- Remove barriers in our recruitment, retention and development processes for potential and existing
 employees and aim to ensure that people from all sections of our community have fair and transparent
 opportunities within all areas of the council's control.
- Look at groups that are under-represented and consider positive action strategies to encourage people from all groups to apply.

Learning Accord Multi Academy Trust recognises that all employees have an individual responsibility in the promotion of equality and diversity.

Information about you

| Name: | | |
|-------|--|--|

Gender / DOB: Male \square Female \square Date of birth

Name / Gender / Date of Birth

Continued overleaf

Ethnicity

| How would you describe your ethnic origin? (tick ✓ one box only) | | | |
|--|---|--|--|
| White | English / Welsh / Scottish / Northern Irish / British | | |
| Iris | sh 🗆 | | |
| | Any other White background (please write in) | | |
| Asian or Asian British | Indian □ Pakistani □ Bangladeshi □ Kashmiri □ | | |
| | Any other Asian background (please write in) | | |
| | | | |
| Black or Black British | Caribbean African | | |
| | Any other Black background (please write in) | | |
| Mixed | White and Black Caribbean \square White and Black African \square | | |
| | White and Asian | | |
| | Any other mixed background (please write in) | | |
| | | | |
| Other Ethnic Origin | Chinasa Any other Ethnia Origin | | |
| | Chinese□ Any other Ethnic Origin □ (please write in) | | |
| Disability | | | |
| Do you consider yourself to be a disabled person? | | | |
| Yes □ No □ | | | |
| | | | |
| Carried Original Albert | | | |
| Sexual Orientation | | | |
| How would you describe y | our sexual orientation? (tick ✓ one box only) | | |
| Heterosexual/Straight □ | Gay man \square Lesbian/Gay woman \square Bisexual \square | | |
| I am not prepared to say \square | | | |
| None of these (please v | vrite in) | | |
| | | | |
| Religion | | | |
| What is your religion, even if you are not currently practising? (tick ✓ one box only) | | | |
| Buddhist Christian | ☐ Hindu ☐ Jewish ☐ Muslim ☐ Sikh ☐ No religion ☐ | | |
| I am not prepared to say \Box | Any other (Please write in) | | |