



EQUAL OPPORTUNITIES MONITORING FORM

The British Paralympic Association is an equal opportunities employer and intends to treat its employees and any applications for employment fairly, in accordance with the Equality Act 2010.

In order to help us to achieve this we respectfully request that you complete this form in order that we can use the information to monitor the effectiveness of our policies and procedures.

The information contained in this form will be used for statistical monitoring purposes only.

- 1a **Name (EXISTING EMPLOYEES ONLY):** _____
- 1b **Please state which job you are applying for/employed in:** _____
- 1c **Date of application/start of employment:** _____
- 1d **Where did you see this role advertised?** _____

2 ETHNIC ORIGIN:

I would describe my ethnic group as:

White:	British	<input type="text"/>	Irish	<input type="text"/>	Any other white background*	<input type="text"/>
	Welsh	<input type="text"/>	Scottish	<input type="text"/>	Northern Irish	<input type="text"/>
Mixed:	White and Black Caribbean	<input type="text"/>	White and Black African	<input type="text"/>		
	White and Asian	<input type="text"/>	Other mixed *	<input type="text"/>		
Black or Black British:	Caribbean	<input type="text"/>				
	African	<input type="text"/>	Any other black background*	<input type="text"/>		
Asian or Asian British:	Indian		Pakistani			
	Bangladeshi	<input type="text"/>	Any other Asian background*	<input type="text"/>		
Chinese or Other Ethnic Group:	Chinese	<input type="text"/>	Other Ethnic Group*	<input type="text"/>		

*Please specify: _____

3 GENDER:	Male	<input type="text"/>	Female	<input type="text"/>
	Intersex	<input type="text"/>	Non-binary	<input type="text"/>
	Prefer not to say	<input type="text"/>		

If you would like to use another term of your choosing, please state here _____

4 If Female, are you presently Pregnant ☐ Within 26 ☐
Weeks of having given birth

5 **AGE:** Under 25 ☐ 26-30 ☐ 31-39 ☐ 40-44 ☐
45-49 ☐ 50-54 ☐ 55-59 ☐ 60-64 ☐ 65+ ☐

6 **DISABILITY:**

Disability is defined in the Equality Act 2010 as “a person has a disability if s/he has a physical or mental impairment which has a substantial and long-term adverse effect on their ability to carry out normal day-to-day activities.” For example, this can include diabetes, epilepsy, learning difficulties, hearing, speech, or visual impairments, physical impairment, arthritis and heart problems.

Do you consider yourself to have a disability? Yes ☐ No ☐

Please provide further details: _____

7 **SEXUAL ORIENTATION:** How would you describe your sexuality?

I am	Bisexual	<input type="checkbox"/>	Homosexual (Gay/Lesbian)	<input type="checkbox"/>
	Heterosexual/Straight	<input type="checkbox"/>	Other*	<input type="checkbox"/>
	Prefer not to say	<input type="checkbox"/>		

*Please specify: _____

8 **MARRIAGE AND CIVIL PARTNERSHIP:** Are you presently:

Married	<input type="checkbox"/>	Single	<input type="checkbox"/>
In a Civil Partnership	<input type="checkbox"/>	Cohabiting	<input type="checkbox"/>
Widow/ Widower	<input type="checkbox"/>	Prefer not to say	<input type="checkbox"/>

9 **RELIGION:** How would you describe your religion or belief?

Christian	<input type="checkbox"/>	Buddhist	<input type="checkbox"/>	Hindu	<input type="checkbox"/>
Muslim	<input type="checkbox"/>	Sikh	<input type="checkbox"/>	Jewish	<input type="checkbox"/>
Agnostic	<input type="checkbox"/>	None	<input type="checkbox"/>	Other*	<input type="checkbox"/>
Prefer not to say		<input type="checkbox"/>			

*Please specify: _____

General Data Protection Regulation (2016)

The information you have provided on this form will remain confidential and will only be used as part of the recruitment process (job applicants) or on your employment record (employees) for equality monitoring purposes. The information will be securely stored and will not affect your recruitment or employment, or be used for any other purpose. When processed, any statistics will always be anonymised. Individual forms will be stored securely and destroyed after three months.

Many thanks for taking the time to complete this form and thank you for assisting us in actively promoting equal opportunities.